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## ORIGINAL ARTICLES.

## THE CHARGE OF "EXCLUSIVISM" AS APPLIED TO HOMCEOPATHISTS.

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The time was when the charge against homocopathists was, that their doctrine of similia similibus curanwas, that their doctrine of similar similars curantur, which is all of homoeopathy (but not all embraced in the homoeopathic physician's practice), was false, and that its professors were "either knaves or fools," and on this ground homoeopathists were excluded from fellowship with those who controlled medical societies; so that those who were convinced of the truth of the new doctrine were forced to form societies, etc., of their own, and to become known as a distinct school. Thus the responsibility for the existence of this new school clearly rests upon the old school.

rests upon the old school.

But times change, and as old positions are found to be untenable, those who have prejudices to indulge must find new pretexts for the excuse of action which is found to be condemned by public judgment, and so, of late, the charge of the dominant school against homeopathists has, with great adroitness and effrontery, been shifted from that given to that of "exclusivism," as a justification for refusal of professional recognition.

Let us grapple with our old assailant on his more recently selected ground, and see whether he has gained strength by his change of position.

And first let us inquire if this "exclusivism" is charged as though it were avowed, or simply as an imputation, for a wide difference exists. If it be contended

putation, for a wide difference exists. If it be contended that it is avowed by homeopathists in general, the charge is met by a flat denial. It is further met by abundant proof that they are the opposite of exclusive—that they are as comprehensive as their judgments incline them to be without any avoid as well as the proof of the second o incline them to be, without any creed or restriction to limit them in their practice.

It will by no means answer to show that particular individuals, especially a half or a quarter of a century ago, may have held that it required more than the acceptance of the law similia similious curantur to constitute a homeopathist; that this or that additional doctrine must be included. Would it be fair to go back to the time of Hufeland, with his "three cardinal means of cure—blood letting, opium, and calomel"—and claim that he was a representative of allopathy to-day?

he was a representative of allopathy to-day?

There is a fair way, for those who are inclined to be fair, to judge of homeopathists with reference to this imputation of exclusivism. This school of practitioners has, in this country, a national representative body—the oldest of our national medical associations—called the ships, with clinical instruction on Physical Diagnosis, American Institute of Homeopathy. Let us examine its position: The first section of the constitution of this body, in defining its object, declares it to be "the improvement of homeopathic therapeutics, and all other departments of medical science." This Institute publishes a large and valuable volume of "Transactions" and Therapeutics, Physiology, Chemistry, Anatomy, Surgery, Obstetrics and Diseases of Women and Children.

Besides these regular and indispensable branches, there will usually be found professorships, or lecture-ships, with clinical instruction on Physical Diagnosis, Diseases of Heart and Lungs, Gynacology, Ophthalmology and Otology, Psychological Medicine, Pædology, Diseases of Genito-urinary Organs, Dermatology, Mervous Diseases, etc., embracing everything necessary for a complete medical education.

every year, containing excellent papers and discussions upon all the different branches—general and special—of medical science. An examination of the last of these volumes will disclose the existence of the following bureaux Materia Medica and Provings, Pharmacology, Clinical Medicine, Pædology, Psychological Medicine, Gynæcology, Obstetrics, Surgery, Sanitary Science, Ophthalmology, Otology, and Laryngology; Microscopy and Histology, Anatomy, Physiology and Pathology; Medical Legislation, Medical Education, Organization, Persistantics and Statistics Registration and Statistics.
These bureaux are composed of not less than seven

selected members each, whose duty it is to prepare papers for presentation at the meetings of the Institute, designed to bring up the latest knowledge on their respective subjects. The papers are presented, some being read and discussed, others referred to a publication committee for publication in the Transactions, if approved; so that the investigations of the members of this school are shown to be universal in their scope, and in the most emphatic manner possible, prove the falsity of the imputation of exclusivism as applied to homocopathic physicians, whose practice is as comprehensive as is the nature of their studies.

The candid man, who may have been led by misrepresentations to regard homocopathists as exclusive, will, if he will examine these volumes of Transactions, have his mind thoroughly disabused, and will see that he has been following blind guides in the persons of prejudiced allopathic professors and editors.

Another method of determining the extent of the

comprehensiveness of the studies and practice of the school in question is by examining the work of its medical colleges, which, of course, prepare the most of the modern representatives of the system. Such an examination will show that all the studies pursued and all the departments of knowledge taught in the best allopathic colleges are also taught in these—and quite as thoroughly taught—the standard of education being generally higher than in the average allopathic schools the only important difference being in the subject of Materia Medica and Therapeutics, in which, it is claimed,

the new school is greatly superior.

To state this more distinctly, it may be mentioned that all of the twelve homeopathic colleges in this party. country, which are probably instructing, in the aggregate, twelve or fifteen hundred students, teach the usual branches of Practice of Medicine, Materia Medica and Therapeutics, Physiology, Chemistry, Anatomy, Surgery, Obstetrics and Diseases of Women and Chil-

"regular" of the straightest sect point out in these representatives of the homeopathic school?

With the indisputable proofs here presented, of the falsity of the charge referred to, can anyone, with any regard for his character for truthfulness, ever reiterate the vain assertion?

The case, with the argument thus complete, may well be rested here; but it will be interesting to consider

some points incidental to this discussion.

It has been much the fashion with opponents of hom copathy to assert that to be a consistent homocopathist one must not only adopt homosopathy (similia similibus curantur), but that certain dogmas of Hahnemann, or some other man, must be accepted also, and that the homocopathist who does not so adopt or accept, while avowing himself a homocopathist, is inconsistent and dishonest! And, notwithstanding the fact that the individual right of the physician to accept or reject any or all of the said dogmas has been constantly and emphatically declared and maintained, there is scarcely an assailant of homoeopathy who does not shamelessly continue to insist upon this absurd position. It is also claimed that homeopathists, because they believe in the usefulness of the homœopathic law, are limited to the application of that law in their practice. each practitioner did not decide for himself the extent of the applicability of the principle, and as though the whole domain of medicine were not as open ito the homeopathist as to any other practitioner! As though everything embraced in the medical knowledge of the man was not to be made available for the relief of his patient! Who has a right to fix these limits which have not been acknowledged by homeopathists? Everything which can aid an intelligent physician is used, and without inconsistency, for the dictum of an opponent cannot confine one to an unacceptable method the homocopathy that is portrayed by opposition profes sors and journals is practically unknown to the homeopathist, and is regarded simply as a travesty of the system. He would be a bold man, of whatever school of medi-

cine, who would hold that the late revered Dr. Constantine Hering was not a true homeopathist, and yet, in the preface to the first American edition of Hahnemann's "Organon," he used these terms: "Whether the theories of Hahnemann are destined to endure a longer or a shorter space, whether they be the best or not, time only can determine; be it as it may, however, it is a matter of minor importance. For myself, I am generally considered as a disciple and adherent of Hahnemann, and I do indeed declare that I am one among the most enthusiastic in doing homage to his greatness; but, nevertheless, I declare also that, since my first acquaintance with homeopathy (in the year 1821) down to the present day, I have never yet accepted a single theory in the 'Organon' as it is there promulgated. It is the genuine Hahnemannian spirit totally to disregard all theories, even those of one's own fabrication, when they are in opposition to the results of pure experience

That living veteran in homeopathy, an ex-president of the American Institute of Homeopathy, and president of the Hahnemann Medical College of Chicago, Dr. A. E. Small, in an address opening a late session of the College, referring to "the good old ship Hahnemann," uses these words (which can scarcely be regarded as indicating exclusivism): "She sails under the old bandle ship that the ship this sails under the old bandle ship that the ship this sails under the old bandle ship the sails under the sails ner- Hold fast that which is good, and be ever ready to embrace with open arms any new and valuable discov-She never loses sight of that polar star Similia, which holds the three kingdoms of nature in perpetual

The sixteen homocopathic journals published in the United States are also engaged in disseminating knowledge in all these various departments.

What evidence of exclusivism or irregularity can the transfer of the unaulmous endorsement. Referring to the opposition, the said: "They accuse us of practicing under an 'exunanimous endorsement. Referring to the opposition, he said: "They accuse us of practicing under an 'exclusive dogma,' and give this as a reason why they cannot join with us. We should teach them that while we believe the law of similars to be a general law, like the law of gravitation, we do not believe it to be an exclusive law in therapeutics, and only universal in its own department. Rest and food will restore the exhausted energies, chemical agents will overcome the effects of certain poisons, and the violent symptoms of an overloaded stomach may be quickest cured by an emetic; yet all these do not disprove the universality of the law of similars, nor does this law teach us to discard other requisite methods of removing the causes and effects of disease. There are many affections that are absolutely incurable under any system of medicine, and in such we claim that, to the true physician, the whole line of palliative treatment is open," etc.

These expressions, from representative sources—and such might be multiplied without limit—show the real position of homocopathists as to the range of measures accepted when needed by them. By what canon, then, can exclusivism or irregularity be shown?

Such being the real condition of things, it may per tinently be asked: Why this persistency on the part of allopathic representatives in making charges which can only rebound upon their authors or promulgators?

The answer is apparently to be found in the fact of the rapid advance of homosopathy, especially among the more cultured and desirable class of patients. While, more cultured and desirable class of patients. the wish being father to the assertion, it was formerly insisted that "homoeopathy is dying out," there is scarcely any one ignorant or bold enough to claim this now. There is rather a complaint of its progress, which almost frantic efforts are made to prevent. Of the extent of this progress, some idea may be formed by attention to the following. The Medical Advance of recent date states

"There are 7,000 homocopathic physicians in the United States, and 278 institutions; 4 national societies report 1,069 members; 26 State societies report 1,783 members; of 103 local societies, 66 report 2.355 members; of 13 clubs, 7 report 97 members; of 23 general hospitals, 18 report 1,268 beds. 15 of these last year treated 6,675 patients, and the estimated value of 11 of these hospitals is \$770,500. Of 30 special hospitals, 15 report 859 beds, and 9 of these treated last year 10,-617 patients, of whom about one-half were confined on their beds; and the cost of 10 of these institutions was Of 39 dispensaries, furnished 256,589 Twelve medical colleges have had \$1,006,000. prescriptions. 1,267 students, and graduated 421 physicians this year, and 5,680 since they were founded. Sixteen journals have published this year 9,748 pages.

The U. S. Medical Investigator, of Jan. 6, speaking of the increase of homocopathy, says: "We have gathered a list of nearly 8,000 homocopathic physicians. These, we believe, do not include all avowed homeopaths—to say nothing of those who practice it 'on the sly.' We believe that our numbers have doubled in the last ten years, and still they come. Every mail brings new names for our literature.

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If homeopathy had really been the exclusive system that it has been fancied, doubtless the predictions of allopathic prophets as to its "dying out, been fulfilled. But observe what a gland would have But observe what a glance at the real situation discloses

Fifty years ago there were probably not over seven practitioners of the new school in the United States, with no institutions. Query: If, from seven, we have, in fifty years, grown to seven thousand, what should be contribution to our resources for the relief of human suffering, and for the promotion of longevity."

At the last meeting of the American Institute of Homœopathy, the president, Dr. Wm. L. Breyfogle, in predominating school? The "dying out" will soon be adaptation to the progress which has been resisted, is

not shown.

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The facts above presented do not fully represent the extent of the progress of homeopathy, for it is well known that the advanced allopathists are constantly appropriating, without credit, a considerable part of homocopathic practice, while all of the recent works on Materia Medica contain large and important abstractions from homocopathic literature. That the ordinary practice has been greatly modified by homocopathy has been frequently remarked by intelligent observers, and is generally acknowledged.

The superiority of the results of the modern practice, as shown by statistics of treatment of yellow fever, cholera, pneumonia, dysentery, have, of course, given the old school much alarm and perplexity, and caused a resort to all sorts of explanations of homocopathic cures -all but the correct sort. These results have rendered homoeopathists so confident that they have often apfor opportunities to test, side by side, in hospitals, etc., the comparative merits of the two sys-tems—while these appeals have been as often rejected

where allopathy was able to dominate.

Some opportunities have been obtained, however, despite opposition, and in such cases the exhibition of result has always been to the advantage of the homeo-pathic side. So apparent has this been that a life insurance company, the Homeopathic Mutual, of New York, was established years ago upon the basis of such results, and has been doing a prosperous business in furnishing insurance to those employing homeopathic treatment, at a lower rate of premium than is charged upon ordinary risks.

It is not so strange, then, that with this record of progress and success, the "blind leaders" of the opposition should be making eager efforts to decry the system, and to warn the allopathic youth against its adoption, gracelessly referring to it as "irregular and

exclusive

But in what position do those place themselves who resort to such tactics, and practice such detraction? Ignorant, or malicious from prejudice, they certainly must be. The question of exclusiveness is not to be settled by gratuitous imputation.

Do those who superciliously arrogate to themselves the "distinctive" and complimentary title of "regular" know the meaning of the term they so flippantly apply to those who are as well qualified in their profession, and who are as conscientious and as correct in their pro-

fessional deportment as themselves?
Dr. J. W. Dowling, in his presidential address before the meeting of the American Institute of Homosopathy, in 1881, beside referring to some absurd and stultifying action of the American Medical Association, in which it practically excluded homeopathic students-how cruel! —from the teachings and the colleges of allopathy, (which one of the leading allopathic journals character-ized as a "step backward" and "a stupid thing,") proceeded:

"It strikes me there should be no great difficulty in defining the word "regular" as applied to practitioners of medicine. Homosopathists have always, since the term was introduced, taken exception to the exclusive use by the dominant school of medicine, as applied to themselves, of the word "regular," and we have also taken exception to the use of the word "irregular" as applied to ourselves by our professional brethren of the old school, and claimed that there was no legal or

on the other side, if modification of old methods, and of the American Medical Association is silent on the subject, and as no medical body has ever given a definition of the phrase "regular physician," and as members of this body claim to be regular physicians, and as we have the same right to define the words regular and irregular as applied to medical practitioners as has any other organization, and as this is the oldest national medical organization, and as there is much in the right of priority, would it not be well for this Institute, taking Webster's Unabridged Dictionary as a guide, to define, for the benefit of the medical profession at large, the phrases "regular physician" and "irregular physician" Webster defines the word regular as "conformed to a rule—agreeable to an established rule, law, or principle
—to a prescribed mode, as a regular practice of law or
medicine—governed by rule or rules—steady or uniform -not subject to unexplained or irrational variain coursetions—instituted or initiated according to established forms or discipline, as a regular physician.' Taking the history of medicine for the past fifty years as our guide, I would ask, to which system does the term regular, ac-

cepting Webster's definition, apply ?"
The Institute, with entire unanimity, adopted the suggestion of President Dowling, and stamped the definition thus: A regular physician, a graduate of a regular medical college. The term also applies to a person prac-ticing the healing art in accordance with the laws of the country in which he resides.

The prejudiced enthusiasts who control the American Medical Association, will find it hard to improve upon this, at least they have not done so. They will find it impossible to prove irregularity or exclusivism upon homeopathists, however ridiculous they may make themselvss before the world by votes.

It is to be remembered that the old code of ethics of the American Medical Association was and is practically the guide of homocopathic physicians. It has only been recent arbitrary rulings upon that code that caused the American Institute of Homocopathy to adopt a code which is not essentially different from what the old one would be, construed without partizanship and with reasonable liberality. It is to be remembered that all of the oldest homocopathists were converts from the old practice. It also is to be remembered that the immediate followers of the oldest set were graduates of the old colleges, as are many of the recent members of the

The inconsistency of the position of the American Medical Association, taken under influence of evil counsels-much to the regret and mortification of many of the better members-will be apparent upon considering the above facts, and also by reflecting upon the injustice shown in such a case (and there are many such) as the

following:

A young man desiring to enter the medical profession-which he has somehow heard is a "liberal" proresion—finds his best opportunity for study under a respectable homeopathic practitioner. The usual branches are studied, while he has opportunity for observing, among other things, the application of homeopathic therapeutics. His courses of lectures are taken at an allopathic college, while he observes allopathic practice in clinics and hospitals—and he receives his diploma. Carefully comparing all he knows of the two systems, and with a determination to put in practice the best he knows, from whatever source it may have been learned, he finds that with his views his natural alignment is with the homocopathic school (he not being responsible for existing distinctions), which, as a conold school, and claimed that there was no legal or responsible for existing distinctions), which, as a contending most positively that every regularly chartered professional recognition, and is denounced as irregular college was a regular medical college, and that every graduate of such a college was a regular practitioner of medicine. Now, in the absence of any distinct and authorized declaration on the part of the prominent medical associations of this country as to what constitutes a regular practitioner, and as the code of ethics is not upon the brave man who has conscientiously, notwithstanding the sacrifice involved, exercised his right of freedom of judgment as to therapeutic methods.

The question here, it is to be borne in mind, is not as to the truth or superiority of homocopathy, but as to the right to assume superiority as "regulars," and apply the right to assume superiority as " regulars," opprobrious and derogatory epithets, and to exclude an honest practitioner, whose views are not approved, from fellowship, upon false grounds. The community at large has a voice upon this subject, and it is making

itself heard.

The pretence that the reputable homoeopathist practices, in violation of a clause of the code of ethics of the American Medical Association, is scandalous, for always and emphatically have homocopathists declared that they do not "practice upon an exclusive dogma, to the rejection of the accumulated experience of the profession, and the aids actually furnished by anatomy, physiology, pathology, and organic chemistry." Nothing desirable or useful is rejected—the use of everything approved is claimed—while all of the branches referred to are ably and thoroughly taught by professors and specialists in homocopathic colleges.

It will be seen, then, that when the American Medical Association takes action against homoeopathists, it is forced to fabricate a slander in order to make out a case. How long its present attitude shall be maintained is a question which addresses itself to the sentiments of honor and decency among the members of that body,

which was once more respectable than at present Brother Allopathist, mount as high a horse as you choose; take as lofty a position as you may; condemn and exclude quackery as it deserves, and the homoco-pathist will be with you. But let your definition be distinct and your proof absolute, and be sure that you do not live in a glass house. Beware of a misapplica-tion of terms and abusive expressions, remembering that "curses are like young chickens, and still come home to roost"—sometimes in a most awkward way.

Those who may be inclined in the future to assail

homoeopathy with the weapons of misrepresentation, which have been so freely and so unscrupulously used, may be reminded with emphasis that there is a code which even allopathic physicians, in their seal to traduce homocopathy, will not be held guiltless for disregarding, one item of which admonishes: "Thou shalt not bear false witness against thy neighbor."

## FACTS AND FANCIES.

BY ELDRIDGE C. PRICE, M.D., BALTIMORE, MD.

That cures of diseases may follow the administration of the fluxion preparations of drugs it is unreasonable to doubt; but whether the cures result from the in-herent medicinal virtue of these preparations may safely be questioned.

The same doubt may also confront us relative to cures following the use of numbers of supposable remedial Certain causes of effects can be demonstrated, others are only more or less apparent, while another class is simply founded upon assertion. To this latter the fluxion theory looks for refuge.

That Drs. Fincke, Swan, and others "of that ilk," are honest in their belief of the efficacy of their hyperdilutions, I do not doubt; neither do I doubt the witch-craft credulity of Cotton Mather.

No man has a right to interfere with the opinion prerogative of the fluxion dilutionists; we, therefore, claim the same wight to helieve in the supers of Edward.

claim the same right to believe in the cures of Edward the Confessor.

Who doubts the fluxion cures?-or who doubts the

cures of King Edward?

Who doubts the testimony of Fincke ?-or who doubts

Wiseman?

The reason for the falth that is within the fluxionists is found in the practical results of their treatment. So is that of Sir Kenelm Digby found in the results of his treatment.

Who doubts the efficacy of the "powder of sympathy?" Does Dr. Fincke? Does Dr. Swan?

I believe these parties have not attempted to explain the action of their dilutions (it is logically impossible), but to prove their worth have simply relied upon the cures following their administration. Sir Kenelm Digby did more than they, he offered a most ingenious solution to his proposition in addition to exhibiting his cures.

These modern transcendentalists ask us to believe in cures produced by—what? existence cannot be proved. A something whose very

They are fundamentally, logically inferior to our ancient mystery monger. The latter gave us substance to act upon substance, and words or intangibilities to act upon the mind; while the fluxionists attempt to administer intangibilities to both mind and matter.

Here is a narrative of some interest, which I quote from Pettigrew's "Medical Superstition":—

"Sir John Holt, Lord Chief Justice of the Court of King's Bench, 1709, it is said, was extremely wild hing's Bench, 1709, it is said, was extremely wild in his youth, and being once engaged with some of his rakish friends in a trip into the country, in which they had spent all their money, it was agreed they should try their fortunes separately. Holt arrived at an inn at the end of a straggling village, ordered his horse to be taken care of, bespoke a supper and a bed. He then strolled into the kitchen, where he observed a little girl of this tens abiration with a series of the same and the same of the same and the same are same to the same to th of thirteen shivering with an ague. Upon making in-quiry respecting her, the landlady told him that she was her only child, and had been ill nearly a year, not-withstanding all the assistance she could procure for her from physic. He gravely shook his head at the doctors, bade her be under no further concern, for that her daughter should never have another fit. He then wrote a few unintelligible words in a court hand on a scrap of parchment, which had been the directions affixed to a hamper, and, rolling it up, directed that it should be bound upon the girl's wrist and there allowed to remain until she was well. The ague returned no to remain until she was well. The ague returned no more; and Holt, having remained in the house a week, called for his bill. 'God bless you, sir,' said the old woman, 'you're nothing in my debt, I'm sure. I wish, on the contrary, that I was able to pay you for the cure which you have made of my daughter. Oh! if I had had the happiness to see you ten months ago, it would have saved me forty pounds.' With pretended reluctance he accepted his accommodation as a recompense, and rode away. Many years elansed. Holt advanced in and rode away. Many years elapsed, Holt advanced in his profession of the law, and went a circuit as one of the judges of the Court of King's Bench, into the same country, where, among other criminals brought before him, was an old woman under a charge of witchcraft. To support this accusation, several witnesses swore that the prisoner had a spell with which she could either cure such cattle as were sick or destroy those that were well, and that in the use of this spell she had been lately detected, and that it was now ready to be produced in court. Upon this statement the judge desired it might be handed to him. It was a dirty ball, wrapped around with several rags, and bound with packthread. These coverings he carefully removed, and beneath them found a piece of parchment, which he immediately recognized as his own youthful fabrication. For a few moments he remained silent—at length, recollecting himself, he addressed the jury to the following effect: Gentlemen, I must now relate a particular of my life, which very ill suits my present character and the station in which I sit; but to conceal it would be to aggravate the folly for which I ought to atone, to endanger innocence, and to countenance superstition. This bauble, which you suppose to have the power of life and death, is a senseless scroll which I wrote with my own hand and gave to this woman, whom, for no other reason, you accuse as a witch.' He then related the particulars of the transaction, with such an effect upon the minds of the people that this old landlady was the last person tried for witchcraft in that country."

"Boetius de Boot says he cured a maid of Prague who had suffered from a violent hemorrhagy for six years, for which she had often been bled, and various remedies resorted to without effect, by merely hanging a jasper round her neck, which effected her cure."

Dr. Paris, in his Pharmacologia, relates an anecdote in point, which was "communicated to him by the late Mr. Coleridge," and which is quoted by Pettigrew, viz:

--- As soon as the powers of nitrous oxide were dis covered, Dr. Beddoes at once concluded that it must necessarily be a specific for paralysis; a patient was selected for the trial, and the management of it was intrusted to Sir Humphrey Davy. Previous to the administration of the gas, he inserted a small pocket thermometer under the tongue of the patient, as he was accustomed to do upon such occasions, to ascertain the degree of animal temperature, with a view of future comparison. The paralytic man, wholly ignorant of the nature of the process to which he was to submit, but deeply impressed, from the representation of Dr. Beddoes, with the certainty of its success, no sooner felt the thermometer under his tongue than he concluded the talieman was in full operation, and in a burst of enthusiasm declared that he already experienced the effect of its benign influence throughout his whole body; the opportunity was too tempting to be lost; Davy cast an intelligent glance at Coleridge, and de-sired his patient to renew his visit on the following day, when the same ceremony was performed, and repeated every succeeding day for a fortnight; the patient gradually improved during that period, when he was dismissed as cured, no other application having been used."

So earnest were some of the believers in the healing so earnest were some of the believers in the healing touch of the English kings, that Jeremy Collier, in the Ecclesiastical History of Great Britain, says: "King Edward the Confessor, was the first that cured this distemper" (scrofula), "and from him it has descended as an hereditary miracle upon his successors. To dispute the matter of fact, is to go to the excesses of skepticism, to deny our senses, and he incredulous even skepticism, to deny our senses, and be incredulous even to ridiculousness.

"William of Malmesbury relates several miracles performed by Holy St. Edward, one of which refers to a woman affected with scrofula, which manifested itself by an extraordinary enlargement of the glands of the neck." "Joyous health followed the healing touch."

Not only did the laity believe in the healing power of the king's touch, but numbers of the medical profession were convinced. A work entitled "Adenochoiradelogia: were convinced. A work entitled "Adenochoradelogia: or an Anatomick-Chirurgical Treatise of Glandules and Strumaes, or King's Evil Swellings," was written by "John Brown, one of the surgeons in ordinary to Charles II., and surgeon to his majesty's hospitals." A not unimportant character, and an "advocate for the royal gift of healing."

erjeant-Surgeon Wiseman, one of the best early English writers upon surgery, bears testimony to the efficacy of the king's touch, and he devotes an entire

book to the subject."

He says: "I myself have been a frequent eye witness of many hundreds of cures performed by his majesty's touch alone, without any assistance of chirurgery; and those, many of them, such as had tyred out the endeavors of able chirurgeons before they came thither."
He further remarks that Charles II. "cureth more in any one year than all the chirurgeons of London have done in an age." The celebrated alchemist, Elias Ashmole, mentions the case of a man "whose condition was so bad that no one could be found willing to recommend him to his sovereign's assistance." But by ingenuity the man appeared before Charles II., who touched "his dreadfully ulcerated nose, which from

that time improved and ultimately recovered."
Evelyn, in his diary, under date of Mar. 24, 1684, says of those whom Charles II. touched: "Some were

reported as not benefited by the practice," "I do humbly presume to assert that more souls have been healed by his majesties' sacred hand in one year than have been cured by all the physicians and chirurgeons of his three kingdoms ever since his happy restoration." In his "Art of Surgery," "Dr. Daniel Turner relates several cases of scrofula which had been unsuccessfully treated by himself and Mr. Charles Bernard, serjeant. surgeon to her majesty, yielding afterwards to the efficacy of the royal touch of Queen Anne."
"Dr. Heylin declares that he has 'seen some children

brought before the king by the hanging sleves, some hanging at their mothers' breasts, and others in the arms of their nurses, all touched and cured without the

help of a serviceable imagination."

May not the influence of the mother's faith, exerted upon the child through her milk, have been at least an element in the reported cures of some of these cases?

In the "Discourse in a Solemn Assembly at Mont-ellier," on the "Sympathetick Powder," "made in French, by Sir Kenelm Digby, Knight, 1657," and published in English in London in 1679, is an interesting account of the case of Mr. James Howel, "well known in France, for his publick works; and particularly, for his Dendrologia," who was wounded in attempting to separate "two of his best friends" who were fighting a who was wounded in attempting to Mr. Howel was very seriously wounded in his duel.

Sir Kenelm says. "It was my chance to be lodged hard by him; and, four or five days after, as I was making myself ready, he came to my House, and prayed me to view his wounds: 'for I understand,' said he, that you have extraordinary remedies upon such occas ions; and my Chyrurgeons apprehend some fear, that it may grow to a Gangrene, and so the hand must be cut In effect, his countenance discovered that he was

in much pain.

"I asked him then, for any thing that had the blood upon it; so he presently sent for his Garter, wherewith his hand was first bound: and as I call'd for a Bason of water, as if I would wash my hands; I took a handful of Powder of Vitriol, which I had in my study, and presently dissolved it. As soon as the bloody Garter was brought me, I put it the Bason, observing the while what Mr. Howel did; who stood talking with a gentleman in a corner of my Chamber, not regarding at all what I was doing. But he started suddenly, as if he had found some strange alteration in himself. I ask'd him what he ail'd? 'I know not what alls me,' said he, but I find, that I feel no more pain: methinks a pleas-ing kind of freshness, as it were a wet cold napkin spread itself over my hand; which hath taken away the inflammation that tormented me before.' I reply'd. 'Since then you feel already so good an effect of my medicament, I advise you to cast away all your plaisters; only keep the wound clean, and in a moderate temper 'twixt heat and cold. After dinner I took the garter out of the water and put it to dry before a great fire. was scarce dry, but Mr. Howel's servant came running, to tell me that his Master felt as much burning as ever he had done, if not more; for the heat was such, as if his hand were betwixt coals of fire. I answered that although that had happened at present, yet he should find ease in a short time; for I knew the reason of this new accident, and I would provide accordingly so that his Master should be free from that inflammation, it may be, before he could possibly return unto him; but in case he found no ease, I wish'd' him to come presently back again; if not he might forbear coming. Away he went; and at the instant I put again the Garter into the water; thereupon he found his Master without any To be brief, there was no sense of pain afterward; but, within five or six days the wounds were cicatriced, and entirely healed." The modus operands Evelyn, in his diary, under date of Mar. 24, 1684, of the powder of sympathy, the knight subsequently says of those whom Charles II. touched: "Some were ing, "a noble person, who hath built up his reason to

so transcendent a height of knowledge, as may seem not much beneath the state of man in innocence," he succeeded in weaving a most intricate and ingenious y. Furthermore, as human authority carried more weight in his day than it does in ours, he could refer to some eminent men as supporters of his belief, among whom were Paracelsus, Ericcius Mohyus of Eburo, Van Helmont, "Goclenius, Burgravius, Des Cartes, Kircher, Servius, Baptista Porta, Severinus, Hortmannus, Gilbertus, Papin, Cabeus, Robertus, Fludd,

With such a host of authorities Sir Kenelm Digby need not have been so solicitous to account for the action of his sympathetic powder upon rational grounds; but he wished to avoid the stigma of a mystery monger, quack or charlatan, with which the bare assertion of his belief without a theory would have branded him. theory is certainly ingenious, and barring his false

premises, most plausible.

Greater men than our fluxionists, men possessing originality, who have made their lasting impress—for good or evil—upon the world, have not been free from the influence of prevalent fancies or superstitions. Even Roger Bacon, that first great inductive philosopher, was not an exception. "He gravely relates how a ploughman in Sicily found a jar full of yellow water, upon drinking which his whole nature was so entirely changed that from a cleary he became a courtie based. changed, that from a clown he became a courtier, handsome and clever, and lived eighty years in the service of the court. This was the effect of potable gold, which, he says, does wonders when well prepared and thoroughly drawn out (triturated)."

On the continent of Europe as late as the fifteenth century, "the lower animals were in all respects considered amenable to the laws." Consequently law-suits against rats, locusts, caterpillars and other pests, were by these nuisances. It was in one of these legal proceedings that "Chassauee, the celebrated jurisconsult—the Coke of France—won his first laurels." Cotton Mather honestly believed in witches. It is less than a century since Dr. John Brown's theory of "Irritability" stirred the medical world to its centre, "The

famous University of Göttingen," temporarily lost 1,500 students, who were willing to risk their lives for Brun-

The fluxionists are, therefore, not unique for fantasy; but in the march of scientific progress fantasies are luxuries that enervate, and the stalwart men of war can but ill afford to dally with such toys. Would, for the sake of the deleterious relation of Fincke, Swan, et id omne genus, to homecopathy, that some, even approxi-mately plausible theory could be devised to account for the asserted cures made by the fluxion dilutionists. From a scientific standpoint it is best that such beliefs are based upon the shallowest sophistry; but as the enemies of homocopathy make capital out of just such weak points, our human nature can but wish that fluxionism either had never been conceived, or that its propagators could give some good reason for its conception.
"Ah!" says my critic, "but if you doubt the action

of the fluxion preparations, do you not also doubt the action of all other preparations that do not show drug substance under the microscope? Surely the 200th, or even the 30th dilution is intangible?"

Yes, all preparations above microscopic, or spectroscopic detection at least, are intangible; but the difference between the fluxion and the Hahnemannian preparations is, that the former are incorrectly computed washings from the latter, and the latter are correctly computed subdivisions of matter. Friction is necessary to break up, subdivide, and thoroughly diffuse drug matter throughout its menstruum. This element obtains in the Hahnemannian preparations, but is want. ing in fluxion dilutions. Up to a certain degree of sub

\* For a most interesting account of these "Legal Prosecutions ower Animals," see Chambers' Book of Days, Vol., I. p. 126-129

division, substance may be detected in these Hahne-mannian preparations, but beyond this science withholds from man the means necessary to demonstrate material subdivision. Although the extreme of visibility of matter is easily reached, yet we have good reason to believe matter is divisible even beyond our present lens power; as witness, the odor from flowers or musk, the vapor of mercury, etc. And yet there must be some point past which substance cannot be divided without a resolution into its component elements; else matter would be infinite and spirit and substance, or mind and matter, interchangeably one and the same; now giving expression to its existence in one form, and now in expression to its existence in one form, and now in another diametrically opposite; now governed by physi-cal laws, and now independent of them. Necessarily, then, there is a point beyond which substance cannot be divided; but this limit man has not yet discovered—and possibly never will, for then would not the link between soul and body be known? would not this solve the most profound of metaphysical problems?—and until it is discovered, the ultimate virile degree of drug dilution cannot be decided.

We may scoff at and ridicule, as we choose, the high potence fanatic or the fluxion enthusiast, but who can prove his error? Who can prove that the sovereign touch of England's monarchs was never curative?

There are some extreme sectarians who denounce

their opponents most bitterly, because of a constitutional tendency to positivism, who are really not totally devoid of charity, and who are earnestly and honestly striving to attain the truth. It is hardly probable that these gentlemen will accept truth unadulterated by They should grant more possibilities.

These extremist are limited to neither the high nor

These extremst are limited to betther the high nor the low dilution faction. The question of potency, attenuation, or fluxion is no joke with them; they are too deeply interested in modifying the inevitable to appreciate the drollery of fighting windmills.

A writer upon this subject—not of windmills, but potency—lately remarked: "The day has fully dawned whose evening sun will not retire before this mooted question will be settled, not by us, but for us." Others think differently and attempt to force their convictions. think differently and attempt to force their convictions upon their brethren.

The historical, conventional mote they are constantly trying to pluck from the eyes of their neighbors, while they are content to tolerate a veritable cataract in their

own orbs.

Although it has been suggested, as a solution of the potency-limit problem, that the passage of certain laws by the American Institute of Homeopathy would prove satisfactory, yet I take the liberty of doubting the wisdom of such a course.

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Legislation may assist science, it cannot compel individual belief; but science may so enlighten that legisla-tion becomes farcical. It is this want of general knowledge that is largely the cause of the bitterness of feeling

now existing between the factions in medicine.

It would be wise if the schools of to-day adopted rules more nearly like those enforced by the school of Sal-erno, Italy, in the 12th century. The requirements erno, Italy, in the 12th century. The requirements were: "A candidate could not be admitted to examination until he had attained twenty one years of age, and he was required to have studied for seven years of age, and he was required to have studied for seven years; and he had to show publicly his proficiency in Galen, Avicenna, or Hippocrates, and in the analytical books of Aristotle. Another statute says: 'Since it is impossible for anyone to make progress in medicine without a knowledge of logic, we will and command that no one be admitted to the study of medicine until he has been for at least three years engaged in the study of logic."

Bad theory has ever been a curse to medicine;

medicine; good J. Rutherfurd theory has never retarded progress. J. Ruth Russell, in his "History and Heroes of Medicine, "There can be no greater mistake than to suppose that the avoidance of speculation secures a practitioner from error. Men of mind must speculate, because speculation

is a name for thought; men of no mind follow the speculations of others, as the Persians did those of the freeks; and the less they speculate, the more likely are they to become enthralled by a superannuated theory, which a keener intelligence would have exploded, when it was found to be useless."

A study of the various systems of philosophy, and of science so far as advanced, would prevent much of the display of false ideas and poor theories of the present day, and prevent the development of many fanatics and misanthropic spirits, by whom the medical profession is

doomed to be harassed.

The students of science need more of the true spirit of philosophy, a child-like willingness to learn. As Lord Bacon expresses it, they must cease "anticipating facts Such an attribute is an absolute essential to the genuine scientist. He will then enter the solemn domain of

Nature's laboratory, truthfully desirous to know God's laws, refusing no evidence of truth.

Christ said "Except ye \* \* become as little children, ye cannot enter into the kind of heaven." Truly no man is more child-like than Lord Bacon's scientist, possessing faith in the wise laws of Nature's Creator, hope for their future universal acceptance, and charity for those whose eyes and ears are still unopened. Surely such a mind is fit "to enter the kingdom of

#### HYPNOTISM IN SURGERY.

BY F. W. KOEHLER, M. D., LOUISVILLE, KY.

Some months ago a negro by name of Wm. Tell came to me at the Louisville Hom. Dispensary, to have a large tumor removed from his face. He was placed upon the operating table and the attempt made to anæsthetise him with ether. A strange tolerance of the agent was, however, exhibited by the patient, for although Squibb's ether was administered in a very free manner it seemed

impossible to get him under its influence.

So much time was consumed in the attempt to anæsthetise the negro that the operation had to be postponed until next day. On this occasion it was my intention to ase chloroform but so much complaint was made by patient of the sickness that had been produced by the ether the day before that I desisted. He stated that he would prefer to stand considerable pain to being anæsthetised again. Hearing this Dr. A. G. Smith, who had administered the ether the day before remarked that possibly be could mesmerise the patient. The idea was quickly put into execution and somewhat to the surprise of all present the attempt succeeded perfectly. Dr. Smith present the attempt succeeded perfectly. Dr. Smith caused his subject to look steadily at him and then placing a thumb over the root of the latter's nose he bade him close his eyes. The pressure with the thumb continued a short time and then the patient was told that he would now find himself unable to open his And true enough this really seemed an impossibility for the eyelids could be seen to twitch under the attempt to separate them, yet no separation occurred. It was now suggested that I should commence the opertion, but doubting that a condition of anæsthesia had really been produced, I stuck a pin deeply into patient's flesh, and as this excited no apparent pain I proceeded with the operation. It is unnecessary to describe this at length, suffice it to say that the inclsions were, owing to the size of the growth, quite extensive, and that they elicited no apparent pain. During the operation very hot water was used to arrest hemorrhage and several times when a sponge wrung out in it was applied to the wound the patient winced noticeably but not more so than I have seen persons under ether or chloroform do. A word or touch from Dr. Smith would at once appar-A word or touch from Dr. Smith would at once apparently render the anesthesia more profound so that even the hot water seemed to cause no pain. The operation proper lasted just seventeen minutes but the patient was the pelvic region, with vesical and rectal tenesmus

half. After the dressings had been adjusted Dr. Smith commanded his subject to wake up and get off the table. This he immediately did, and when asked concerning his sensation during the operation he stated that he had been conscious of much that had been done but that he had felt no pain whatever. It only remains to be stated that no unpleasant after-effects whatever occurred.

Although much has been said of the possible value of hypnotism in surgery, this seems to be one of the very few operations actually performed with its aid. Perrin, as quoted by Lyman in his excellent article on anæsthet-ics, in the "International System of Surgery" mentions the case of a woman whose breast was amputated while she lay in a mesmeric trance, but further than this I have come across no cases similar to the one just reported. Now, although I am fully aware of the fact that not all are susceptible to the influence, I would suggest that are susceptible to the innuence, I would suggest that more attention be paid to the subject. Would it not be well to experiment on those particularly who have some organic disease contra-indicating the use of chloroform or ether? Hypnotism seems to be entirely harmless, and such patients should be given the benefit of its use, Those who prove unfit subjects could then be anæsthetised with ether or chloroform as of the measure depends on so prevalent that the success of the measure depends on some mysterious influence exerted by the operator is an entirely erroneous one. Professor Hammond, in an extremely interesting lecture reported in the Medical and Surgical Reporter of Dec. 10, 1882, shows conclusively that the success of the experiment depends entirely on the susceptibility of the patient, and on no mysterious power of the operator. He shows that anyone can hypnotise a susceptible subject, and this being the case, there is no reason why we should not all experiment on our patients before resorting to ether or chloroform.

#### PELVIC CELLULITIS.

BY H. H. TINKER, M.D., NEW YORK.

A somewhat extended experience in the treatment of pelvic cellulitis and pelvic peritonitis has convinced me that it is far from being an easy matter to diagnosticate these complaints-especially when either of them co-exists with pelvic hæmatocele, as is often the case when the attack is sudden and the products of inflammation are located in Douglas' cul-de-sac. The constitutions most liable to them are those which have become much enfeebled, and hence provide a fertile soil for septic

Pelvic Cellulitis consists essentially in an inflammation of the arcolar tissue surrounding the uterus, broad ligaments and rectum. It is rarely met with in nonpregnant women, almost always occurring after parturition or abortion, excepting when following upon pelvic peritonitis. It is divided into three stages; those of congestion, of effusion and of suppuration. Resolution may take place, and the exuded products become ab-Resolution sorbed; but every case under my care has terminated by suppuration. The exudation may take place in the broad ligaments, or between the uterus and rectum, imparting a sensation to the touch per vaginam as from small circumscribed tumors. When suppuration ensues these tumors open into each other or separately—some-times by long sinuses—and continue to discharge for an indefinite period; or passages may be formed into the rectum, bladder, uterus, pelvic viscera or vagina. Whatever the outlet, a long time elapses before the adjacent surfaces granulate and adhere and the discharge ceases. Upon vaginal examination the tissues surrounding the uterus will be found doughy, soft and cedematous, ex-

Menstruation is liable to be induced, or the natural flow increased. The symptoms of throbbing and weight are

usually distressing.

Pelvic Peritonitis is a disorder of frequent occurrence, and probably many cases of what is usually called menstrual colic, with fever, vomiting, restlessness, etc., really originate in this condition, which, by exposure during the flow, is continued from one catamenial period to another. It has its regular stages of congestion, exudation and suppuration, though seldom reaching the last-named termination. The lymph becomes organized, and the exuded serum usually gravitates into Douglas' culdesac. The roof of the pelvis is indurated and sensitive to pressure, and the uterus becomes fixed by the deposit of organized lymph, imparting to the examining finger a sensation of hardness and immobility, quite un-like the soft, doughy feeling of cellulitis. This condilike the soft, doughy feeling of cellulitis. tion may be brought on by the use of instruments, by injections, by the escape of menstrual blood into the peritoneal cavity, or by the perforation of a cellular abscess—sometimes as a result of parturition or abortion, in which case it usually becomes general. It often arises from tubercular deposits, the chronic condition being periodically aggravated by the occurrence of menstruation. The temperature in pelvic peritonitis is always elevated. A prominent sign which has never been absent in my cases, and has served as a distinguishing mark of the uncomplicated disease, is the complete cessation of the menstrual flow-or of the flow after parturition-and its nonappearance as long as the inflammation continues; while in cellulitis the flow is not materially impeded, unless the peritoneum is largely involved in the morbid proces The disease usually sets in with a chill, followed by nausea and vomiting, elevation of temperature, anxious expression of countenance, restlessness, tenderness over public region, causing inability to bear the weight of the hedclothes.

The symptoms of pelvic hamatocele are those of acute anemia, and generally the employment of the aspirator soon reveals their true significance.

The first case I will relate occurred in the practice of

my brother, and corresponds in its main features with two other cases which came under my own care last These latter were both followed by pelvic absummer. scess, of which complaint I have observed a total of six-

teen cases, all following parturition or abortion.

Ms. M., aged 35; mother of two children, the youngest two years old. Two months ago she aborted, and since then has suffered from metrorrhagia, with bearing down pains, great heaviness in the hypogastric region, causing walking to be unbearable. At this time she was taken with a chill, followed by fever, bright red discharge from the womb, severe vesical and rectal tenes-Upon vaginal examination, found the uterus raised above the pubis and much anteverted; roof of pelvis thickened and doughy, and an irregular swelling presenting in the region of Douglas' cul-de-sac, imparting a sensation as from several distinct tumors; uterus movable and tender on pressure. Next morning, finding all the symptoms aggravated, I aspirated the lower tumor and drew off about an ounce of pus; the following morning aspirated the second tumor and drew off blood. Various remedies were given to control the hæmorrhage, but finally it became necessary to resort to full doses of fl. ext. ergot and hot water injections. Patient remained in this alarming condition for two weeks—chills alternating with sweat, vomiting and occasional attacks of diarrhora, seemingly threatening collapse. At the end of this time the intense engorgement began to subside, more nourishment was taken, and strength gradually returned. The abscess continued to discharge for nearly two months, but the patient finally became fully convalescent.

The second case is a typical one of pelvic peritonitis.

Mrs. B., widow, had been keeping company with a gentleman for some time, and finding her menses delayed, resorted to some form of mechanical assistance to

re-establish the flow. The desired end was attained, but forty-eight hours after the flow began she was seized with a severe chill, succeeded by high fever, great pain in the pelvic region, and complete stoppage of menstruation. I found the patient on her back, supporting the bed-clothes with her hands, and complaining of excruciating pa'n; all ingesta were vomited; face pale and anxious great restlessness. Upon vaginal examination found the uterus and all surrounding tissues very sensitive to pressure, vessels pulsating and parts hot and dry. Gave veratrum vir. and ordered hot fomentations. Next morning found her in about the same condition; tem-perature 102, pulse 115; much pain and tenderness over public region. On examination found all the pelvic re-gions fixed and immovable; uterus high up; roof of pelvis hard; bowels constipated, with no desire for movement; urine scanty and high colored. Gave opium and continued hot fomentations, with hot water injections repeated every three hours, fifteen minutes each

During the progress of the case a relapse occurred ow-ing to extension of inflammation through sitting up too soon, but the same treatment was continued until, after four weeks, recovery took place, leaving the uterus firmly fixed and all the pelvic tissues contracted. Men-struction came on naturally at the end of two months.

## CLINIQUE.

PRIMARY MEDULLARY CARCINOMA IN THE LIVER, AND SECONDARY TUMORS IN MOST OF THE PARENCHYMATOUS ORGANS AND ELSEWHERE.

REPORTED BY W. STORM WHITE, M. D.

Curator to the Ward's Island Homeopathic Hospital.

The subject of the autopsy held Nov. 12, 1882, was ,et. 72, Italian, laborer, admitted Nov. 8. The clinical history of the case was exceedingly brief, and only covers the time that the patient was in the hospital, (as he spoke no English.) and was confined to what was discovered by physical examinations. The patient was extremely feeble and emaciated; skin had a peculiar dirty-yellowish hue, and was dry. Small scales continually falling off, the whole thorax much deformed, bilateral curvature of the spine. Enlargement and bulging of upper portion of right chest. Veins upon thorax enlarged and prominent, but cannot detect pulsation. Dullness upon percussion of right chest, most marked over lower portion. Left chest gives nor-mal percussion notes. Auscultation gives mucous râles and bronchial breathing over both lungs. Patient has a barking, wheezing cough, which seems to set quite a a barking, wheezing cough, which is expectorated quantity of loose mucus in motion, which is expectorated with difficulty. Breath having a putrid odor. Vegetative functions show a west of activity; almost complete anorexia. Neither urine nor fæces are voided involuntarily. Patient gradually sinking till he died Nov. 10, 1882.

AUTOPSY HELD BY PHYSICIAN, JNO. M. FOSTER, M. D., ASSISTED BY THE WRITER.

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Autopsy.—Height, 5 feet 4 inches; chest, 33 inches; head, 23 inches; abdomen, 25 inches. Rigor mortis well marked; body extremely emaciated and of a dirty yellow color (cachectic); chest presenting the deformities mentioned in the clinical history. The weights of the different organs were: Heart, 11 ounces; left lung. 23½ ounces; right lung, 31½ ounces; right kidney, 6 ounces; left kidney, 6½ ounces; liver, 62½ ounces; sulcen. 614 ounces. spleen, 6% ounces.

Heart: Atrophied; valves normal, except slight cal-

careous deposit in the aortic; evidences of an old endoarteritis in the aorta with the development of cicatricial tissue; no infiltration or discoloration of the cicatrices. Lungs: Emphysema at apices of both lungs; red hepatization of the lower lobe of right lung, the middle lobe showing bronchitis and peri-bronchitis, as does also the lower lobe of the left lung. In both the bronchi are filled with foul smelling pus, and small abscesses also filled with this same pus (7), each abscess being surrounded by a fibrous capsule, showing them to be chronic. Both lungs are infiltrated with nodes, which are large, flattened, dense in structure and hard in consistency, presenting all the characteristics of secondary sistency, presenting all the characteristics of secondary carcinomatous nodes

Pleura: Shows this same carcinomatous affection both on its thoracic and pulmonic surfaces. Some of the nodes reaching the size of the thumb nail. The lymphatics are beautifully mapped out by being gorged with a white creamy liquid. Walls of the blood vessels somewhat thickened.

Liver: Congested, with here and there secondary nodes; the anterior portion of right lobe showing a tumor size of a butternut (afterwards found to be much larger-size of a hen's egg), conical in shape, with its base at the surface.

Spleen: Slightly congested; slight degree of cirrhosis of the adventitia of the larger blood vessels.

Prostate: Hypertrophied, otherwise normal. Bladder: Contracted; walls enormously thickened, the lymphatics filled with a white, probably cellular

Intestines: Large and small, normal.

Omentum and remaining peritoneum show the same cellular engorgement of the lymphatics, with small secondary tumors.

Kidneys: Right—large cyst at upper extremity filled with serous fluid. Parenchymatous portion congested. Same nodes as found elsewhere, and cysts of old formation. Left-shows here and there carcinomatous nodes. The parenchymatous portions normal.

Upon microscopic examination, found tumors to be carcinoma of the small cell or medullary type.

Cause of death: exhaustion.

From the above case much is to be learned concerning the generalization of the carcinomatous affection and its direct results upon the various organs and tissues of the body. The primary tumor appeared in the liver, and we will say nothing of the causes influencing its development in this location, but will confine ourselves to the mode of its subsequent spreading to far distant organs. Although we cannot refute the theory that the disease is transmitted through the blood-vessels, yet this case goes to prove that this is the exception rather than the rule. Nor am I alone in this opinion, as Professor von Recklinghausen, of Strasburg, express himself very strongly in his demonstrations as becoming more and more convinced that the generalisation of cancerous affections is usually through the medium of the lymphatics. According to von Recklinghausen, it is only when an actual breaking down of the central portion of the tumor has commenced that we have the first indication of a secondary affection. This appearance will be found to lie in the course of the lymphatics, and the secondary nodules will be found to be at the first lymphatic glands in the course of the vessels, However, there are well authenticated cases where the epithelial masses have been found within the lumina of the blood-vessels in the neighborhood of the primary tumor, with, at the same time, an inflammation of the intima. But the case in question presents a beautiful example of the generalization through the lymphatics. The whole pleurs was the seat of secondary nodules, and these nodules were connected by engorged lymphaties, causing the surface of the pleura to appear like lace-work. The diaphragm, especially on its in-ferior surface, presented this same delicate tracery of white lines, but in a still more marked degree. Another fact worthy of notice was that the secondary growths patients are in at the time of the reception of their in-were of the same variety as the primary tumor, and juries.

this brings us to another very important fact in connection with the generalization of tumors. Although the carcinoma was of a peculiar and comparatively rare type, yet we find the secondary nodes to be of this same variety. The epithelial elements filling the alveoli were cuboid. The primary carcinoma of the liver usually presents cylindrical cells, but in this case they were to be distinguished from the ordinary liver cells by their arrangement, position, and the absence of pigment. In common with all cancers, the epithelial cells were packed in the alveoli with no approach to order, and there was no intercellular substance. The walls of the alveoli were composed of true fibrous tissue arranged in such a manner as to present the "sponge" formation, so characteristic of this class of tumor. The description of the blood supply would only be a repetition of what has been often stated, and we need not enter into it at present. As to the physical or microscopic examination and diagnosis during life, we may be permitted to make a few remarks. There was something of a cachexia developed, but when the patient was admitted to the hospital other and more important symptoms were particularly noted, and the accuracy of their recognition was proved by the post-mortem examination. dullness on percussion in right lung was explained by the red hepatization and the râles throughout both lungs by the quantity of mucus found in the air vesicles and bronchi. The question here arises, could this carand bronchi. cinomatous condition have been discovered during life? The answer is, No, in the present case, because of the absence of a destructive process in the secondary nodules. It is true that some of the epithelial elements must have escaped into the air vesicles and passed off in the sputa, but we cannot diagnose "carcinoma" from either the presence or absence of any single cell or structure. We must have the whole arrangement of the tumor and its relations to surrounding parts in order to arrive at that result, and as none of the interstitial tissue had been so discharged, the autopsy was our only means of discovering the condition. Another obstacle to the diagnosis was the shape of the epithelial cells. They were cuboid, as are also those of the lung itself. The absence of pigment was no criterion, as it is often normally lacking, and in catarrhal conditions may not be found at all.

From our autopsy we have further proofs pointing towards the two general laws which I have given above:
1. Carcinoma tends towards generalization, and that
generalization is usually along the course of the lymphatics and through the lymphatic vesse's. 2. The secondary tumors are usually of the same variety as the primary carcinoma.

#### HORSE CAR SURGERY.

By H. M. LEWIS, M.D., BROOKLYN, N. Y.

The surgical wards of city hospitals present us with numerous examples of injuries inflicted by horse cars. A recent term of service in the Brooklyn Homœopathic Hospital gave me opportunity to examine, operate upon and otherwise treat several such cases of injury. The character of the wounds inflicted was in some instances unique, and in all characteristic. My observation has taught me that it is quite as dangerous to be run over by a horse car as it is to suffer a similar mishap under the wheels of a locomotive or train of steam cars, and in either instance the apparent injury is often infinitely less than a proper examination proves to exist. The tendency to sloughing is great; soft parts, about what seems a clean cut wound, breaking down, and being cast off. The shock accompanying this class of injuries is often profound, and in many instances the case is complicated by the state of alcoholic poisoning such

The comminution and splintering of bones in cases where the external wounds are small and at first eight insignificant has been a marked feature of such cases as I have seen. The hemorrhage which takes place at the time of injury and immediately after is often excessive; the extent of the injury being such as to deprive the blood vessels of their contractile power, free passive hemorrhage being the result. In one or two cases this has been troublesome after operations, but was then in part due, perhaps, to the recognized influence of the Esmarch bandage which was used.

As fairly illustrative of this class of injuries I sub-join a report of such cases as were in our hospital from

December to February 1, of this winter.

S. S., æt. 48, weigher; admitted 27th of Dec., 1882, 9.50 P. M., one hour after injury. Was run over by horse car. On admission was conscious but died 20 minutes after admission. Post mortem was made, shortly after death, with the following result.

Twenty fractures upper nine ribs, also clavicle on right side, eleven fractures of upper ten ribs on left side, also left clavicle; both pleural cavities containing blood, about six oz. each. Some fragments of ribs had performed pleural cavities also ribs had performed pleural cavity. blood. Found intussusception of intestine (jejunum) not strangulated. This man grave as were his injuries, talked and joked with the ambulance surgeon on the way to the hospital.

G. P. C., at. 47, laborer; admitted 22d of Dec., 1882, seven P. M., one hour after injury.

Was run over by horse car, causing a compound comminuted fracture of both bones of left leg midway between ankle and knee, also compound fracture of right leg, middle and lower third. Left leg amputated shortly after admission, performing antero-posterior flap opera-tion. Also had a contused wound on forehead, left side over eye. Pupils unequally contracted. Died Dec. 24, 10.40 A. M.

P.M.—Cranial cavity opened and pia mater and arach-noid over vertex found opaque and thickened, with serous effusion into right lateral ventricle. The morbid condition of the membranes was not recent, but the effusion was believed to be so and to have caused death.

M. K., set. 40, car-driver; admitted 31st of Oct., 1882, 9,35 P. M., one hour after injury. While intoxicated fell and was run over by horse car, sustaining the fol-

lowing injuries.

Fracture of right clavicle, outer third, contusion of left foot, and two lacerated wounds of right thigh, poste-

Fracture of clavicle was compounded by abscess. Fair recovery, most probably fibrous union. Abscess formed on inner side of right leg which communicates with wound on outer side, by sinus. Probe when introduced, strikes what may be denuded bone. Feb. 12, 1883.—Still considerable discharge, slightly

offensive, cavity reduced in size.

My esteemed colleague, Dr. Willis, treated this case up to Dec. 1. I am informed by the house surgeon that the wounds in the leg on admission looked like knife

H. H., set. 12, school boy; admitted 23d of Nov. 1882, two hours after injury, 9.55 P. M.

Was thrown from front platform of horse car being caught between step of front platform and the ground. Upon admission was conscious and complained of very little pain. Upon examination found either fracture or separation of pelvic bones on left side, and large contusion on right hip. Shortly after admission tempera-ture fell to 94.7°. Reaction soon took place.

Bowels torpid till third day, when they became invol-untary and have remained in that condition. Retention of urine up to Dec. 5, since then there has been a constant dribbling. Paralysis of both legs and lower part of abdomen, extending as far up as line drawn from one ant. sup. spinous process of ilium to the other,

Feb. 12.—Temperature above normal, pulse rapid, weak and very compressible, much emaciated but has good appetite. Other conditions as described above. Paralysis neither increases or diminishes.

J. F., et. 13, errand boy; admitted 12th of Nov. 1882, 5.45 P. M., three-quarters of an hour after injury.

While running across the street was knocked down by horses and struck by car, receiving the follow-ing injuries. A deep lacerated scalp wound in right temple about two inches long, extending beyond and under outer angle of eye, another lacerated wound about three inches long in left parietal region, posteriorily, a fracture at middle of right humerus, and two wounds in left forearm about midway on either side, the inner one extending down to the bone; was unable to make out fracture at this point.

Splints applied to both arms, and edges of wounds on

head brought together.

Feb. 12, 1883.—Complete recovery of arms without deformity, and scalp wounds healed.

Dr. Willis, who was on duty when this case was admitted, should be credited with the very excellent result

W. A. H., æt. 33, photographer; admitted 28th of Dec., 1882, 8.50 P. M., one half hour after injury.

While drunk was run over by horse car, causing fracture of ulna of left arm midway between elbow and wrist, also, a lacerated wound of same arm above elbow on outer side, extending more than half way around arm and five inches longitudinally, muscles involved.

Great deal of sloughing from wound and hæmorrhage

Dressed with balsam of Peru, wound healed rapidly. The flesh wounds in this case also appeared as if inflicted with a sharp cutting implement, but the subsequent sloughing was characteristic.

æt. 44, no occupation; admitted 9th of Dec., C. F. V., æt. 4 1882, 6,40 P. M.

While intoxicated fell under horse car crushing right

foot and receiving contused wound of scalp at vertex about 1½ inches long.

Foot amputated (Chopart's operation) at nine P. M.
Feb. 12, 1888.—Nearly healed, with excellent result.

The wounds in the foot looked like stab wounds, but the foot felt like a bag of loose fragments of bone. Examination showed the bones to be absolutely crushed to

## A PECULIAR CASE.\*

## By S. J. DONALDSON, M.D., NEW YORK.

The life of every physician undoubtedly shows forth many experiences of exceptional character, but owing to the pressure of business, and perhaps also to the dread of appearing ostentatious, comparatively few of these rare incidents arrive at publication. Yet we believe that it is highly instructive, as well as interesting, to occasionally leave the beaten track of ordinary results, and faithfully recount those we may consider extraordi-The case now submitted to your consideration has not been selected so much on account of the instructive features it may possess, as from a desire to elicit a further discussion and a comparison of similar experiences, from which we can hardly fail to derive profits-

ble suggestions.
On the 11th of August I was consulted by Mrs. C., aged 27 years, for the relief of a vulvo-vaginal abscess. She considered herself three months pregnant, giving as her reasons suppression of the menses, morning sick ness, tender mammæ, and the abscess, which was conclusive proof to her mind, she having suffered at the same period of her two previous pregnancies from a similar affection.

<sup>\*</sup> Read before the N. Y. Medico-Chururgical Society, Oct. 10, 1882.

On the 17th of the following February I was summoned to attend her in labor. Found her in good spirits, and to all appearance in excellent condition. domen was so much enlarged as to cause some dyspnœa. An examination showed the os low down, and dilated to about the size of a silver dime, with some muco-sanguineous discharge. As far as the finger could reach, the uterus was large, globular, and fluctuating. The abdominal palpation also failed to indicate any sign of child in utero, the symptoms being more those of a welldeveloped ovarian cyst. As the pains were very slight and the patient comparatively comfortable, I left her; somewhat mystified as to what the nature of the case

might be.

The next day I saw the patient, found her quite rest-ss. Temperature 101, pulse 125. Tongue parched and great thirst. There was slight abdominal tenderness, the lochial discharge had disappeared, and the vagina and os uteri were hot and dry. Complained of frequent chilly sensations, and desired to be heavily blanketed. Face pale and anxious. Prescribed aconite and beliadon-na given alternately. The following night she suffered two severe chills, and the next day all symptoms were aggravated. Temperature 104½, pulse 160. The smallest quantity of liquid could not be retained in the stomach, while her thirst was intense. There was now a constant and profuse perspiration, with, however, no diminution of the temperature. The eyes had that pearly lustre and the symptoms generally were path-ognomonic of puerperal fever. The patient was obviously in a very precarious condition, and was becoming rapidly emaciated. I prescribed quinine sulph. gr. v. every four hours. On the following day no improvement, pulse 105, small, quick and somewhat irregular. Temperature 106, tongue resembling a piece of smoked beef. Retching incessant, as during the night the pa-tient had managed to seize the urinal and drink about a So great was the emaciation that the pint of urine. patient could hardly be recognized as the same person of four days previous. I then gave fifteen grains of quining every six hours, and ten grains of salicylate of soda at like intervals, with three hours intervening.

The next morning upon entering the house, my nostrils were assailed by a most intolerable stench. So offensive was it that the nurses refused to remain in the room. During the night there had occurred a profuse discharge per vaginam, having the appearance, and consistency of liquid tar. The nurse judged that the amount discharged must have been from eight to ten quarts. Every physical symptom was greatly improved, and with vaginal douches and good nursing she made rapid and uninterrupted progress toward recov-In about a week I made a vaginal examination, and found the os still sufficiently dilated to admit the finger. Conjoined manipulation showed the uterus still to be about the size of a child's head. The next day I made a thorough exploration of the uterine cavity with a Simpson's sound, and found what I then supposed to be the remains of a mole or polypus. Some hemorrhage followed the probing. I then prescribed ergot in large doses, and in two days repeated the intra-uterine explorations with similar results. As the ergot produced no decided effect, and the patient was still very feeble, al-though improving rapidly, I decided to defer all further proceedings until such time as it would seem advisable. About a month later when I saw the patient she had fully regained her usual health, and an examination showed the dimensions of the uterus to be considerably increased but asshe expressed herself as being in excel lent health, and seemed averse to undergoing any fur-ther treatment until absolutely necessary I did not see gain. We now pass to the peculiar feature of this About the middle of the following July (I have not the exact date being abroad at the time) she was delivered of a well-developed child weighing nine and a half pounds. The child seemed in perfect health, but in a few days it was attacked with a severe form of 10:25 A. M.

skin eruption and (judging from description received it was pemphigus) and in a few weeks died.

The following prominent points of the case are noteworthy. Suspension of the catamenia fourteen months previous to the date of her confinement; the abnormal state of the uterus at the time of conception, and above all, the uninterrupted progress of pregnancy, despite the nature of her severe illness, and the subsequent treatment above described.

## HOMCEOPATHIC HOSPITAL, W. I.

SERVICE OF DR. J. W. DOWLING. Reported by G. T. Stewart, M.D., Staff Physician.

T. McC, aet. 39. Single; Ireland; laborer. Admitted September 29th, 1882, with malarial intermittent fever. There was no heredity, his mode of life was fairly temperate, and he had previously suffered from malaria and bronchitis.

Previous history: Has been much exposed to severe weather. At first the three stages were intermingled, and the attack passing off left him greatly prostrated, so that at the present time there exists great debility.

Present Condition: Chill, intermingled with the fever and sweat. Sweat relieves his anxious restlessness, but leaves him greatly prostrated. He has frequent attacks of vertigo, with a great deal of yawning and stretching before the chill comes on. Thirst is a marked stretching before the chill comes on. Thirst is a marked characteristics; desires a little vester at a time, and often. Bowels at times constipated, appetite poor. Sleeps well after the paroxysm has passed off. Feels weak, especially in the morning. Chill and fever every day, at 1:15 P.M. Warmth relieves both chill and fever Numb pain in the head after chill; worse by sweat.

B-Arsenicum alb. 1 trit. grs. v., every two hours.

Nov. 25th, was discharged improved.

December 5th, was readmitted with the following history.

Previous History: Left the Hospital on Saturday, November 25th, thinking that he was well, and engaged in business that exposed him much to the weather. This was continued until Friday last, when he had another chill, and since then has been having one every

day; the first coming on at 10 A.M.

Present Condition: The chills are quite severe, with great pain in the limbs, groins and small of the back. Thirst very great before, during and after chill. Sweat quite profuse, hot, and seems to relieve him of all Some pain in frontal region of head during the The bed feels very comfortable to him.

Functions: Bowels regular. Urine normal in quantity, but is little darker than usual. Sleeps well, appetite good.

B—Nat. mur.\*, grs. v, every two hours.

Had but one chill on the next day, after taking the medicine, and was discharged December 27th, cured.

## SERVICE OF DR. C. A. BACON,

Diagnosis: Pneumonitis fibrosa chronica; Cerebral poplexy. W. D., act. 44; single; Canada; composir. Admitted January 24, 1883.

Mode of Life: Intemperate. It is impossible to obtain his previous history, for on arousing the patient from his apathetic condition, he is only able to answer questions

unintelligibly.

Present Condition: The patient lies in a semi-uncon-scious state; he passes his urine involuntarily; his pupils are natural in size and react normally; apparently suffers no pain, except in the back portion of his head, and this is only evidenced by the patient pressing his hand against the occiput. The odor of alcoholic stimulants is very distinct upon his breath.

B-Nux Vom ..... 10 gtta. v. 

AUTOPSY.

Height, five feet five inches; head 21 inches, chest 30 inches, abdomen 25 inches.

Rigor mortis marked. Body very much emaciated.

Heart: Weight 9½ oz. Small anti-mortem clot in right ventricle. The tricuspid valve shows an old endocarditis, and the aortic a slight granulation on each lip.

The aorta yellowish.

The aorta yellowish.

Left Lung: Weight 22 oz. Lung tissue congested and sinfitrated with tubercular deposits, especially in the apex and the inferior part of the lower lobe. The bronchial tubes are filled with a sero-purulent fluid,

with some traces of bronchitis.

Right Lung: Weight 16.5 oz. Upper lobe. In the apex are tubercular nodes and a large cavity lined with fibrinous tissue, which is filled with lardaceous pus, connecting directly with the bronchi. Some of the tubercles are infiltrated with calcareous matter forming

Middle Lobe: Small, atrophic.

Lower Lobe: is bound down by pleuritic adhesion, is congested and has the same purulent exudation into the bronchi as is found in the upper lobe. Very few tubercles; most abundant immediately beneath those portions where adhesions exist.

Liver: Weight 49 oz. Slight fatty infiltration and a brown pigmentation at the centre of the acirci.

Left Kidney: Weight 4 oz, Capsule non-adherent; fatty degeneration; tubercles in the cortex corticis and also in the medullary portion.

Right Kidney: Weight 5 oz. Evidences of fatty de-

generation.

Spleen: Weight 4 oz. The organ flabby and highly

congested.

Brain: Large ante-mortem clot upon the outer surface of the dura-mater on the right side of the brain, somewhat posterior to the sagittal suture. The membrane itself presents appearances of pachy- and peri-pachymeningitis.

Venous congestion of pia mater. Serous effusion into the fourth ventricle, and also externally to the membranes of the cord in the upper portion of the cervical region. On the left side, middle lobe, is an extravasation of blood into the substance, and also into the fissure of Sylvius. Some softening of sub-Effusion into the anterior lobe also connecting with the above mentioned parts.

The effusion has caused a breaking down of the cere-

bral substance and the formation of a cerebral sanguineous cyst. The tissue surrounding this is congested.

Side ventricles, cerebral apoplexy.

Cause of Death: Cerebral apoplexy.

1 1883, by Drs. Jno. M. Side ventricles, cerebullum and medulla are normal.

Autopsy held January 31, 1883, by Drs Foster, Geo. T. Stewart, and Thos. H. Hicks.

#### SERVICE OF DR. J. MCE. WETMORE. SCLEROSIS OF BRAIN.

J. O., act 61. Single; Germany; no occupation. When admitted, Oct. 17, 1882, he presented the

Objective Symptoms: The position of the patient in bed is not constrained, but he turns from one side to the other; the limbs being drawn up or extended at full length when lying on his back. He seems to sleep well, but cannot or will not talk; will stare at any one near the bed; does not seem to be in pain; the mouth is kept open; eyes, half closed; face, dusky red; pulse, strong, full, and slightly accelerated.

No marks are seen on the body or limbs, except upon the first finger of the right hand, which is slightly swollen and red in color. Is not able to protrude the tongue, which is dry and red; the lips are parched and Does not drink water or stimulants, except when forced to take them. Has no desire for nourishment.

Bowels constipated.

During the first day in hospital, passed urine twice involuntarily. Urine is dark red or brown in color.

Patient seems to be much afraid of being injured; the least touch upon any portion of his body causes him to shrink. Upon manipulation, the floating ribs are movable and sensitive to pain. Upper five lumbar vertebræ are somewhat prominent, and the integument covering them erythematous. No tenderness on pres-sure. Pupils contracted and not sensitive to light; conjunction injected. Slight cough, during which time patient opens his mouth, but on attempting to feed him or give medicine, it is almost impossible to open his jaws, and even after fluid is poured into the mouth, it is partly rejected.

Physical examination of chest gives negative results.

B-Opium.... 18 gtts. v. Aqua.....Sig.—Teaspoonful every two hours

Oct. 19. Somewhat brighter; pupils somewhat dilated and act slowly under stimulus of light, Hypersensitiveness continues. Still unable to take food. Ordered enema of beef tea, 3 ii., every three hours,

Oct. 20. Find spontaneous development of bed sores along spine, in dorsal and lumbar region, the parts being cold and red. Patient placed on water bed and bathed with alcohol and water.

R -same.

From Oct, 22d to the 28th the condition of the patient remained about the same; the temperature ranging from 97.2° to 102°, and the respirations from 14 to 16. Enemas of beef tea were administered regularly and the bathing of bed sores with alcohol and water continued.

On the 28th he began to talk and make himself underon the section is began to talk and make nimser understood. His appetite returned, and the enemas were discontinued. He has had a pain in the throat which was aggravated by swallowing. This condition continued up to Nov. 4, when he suddenly refused to eat, to take

his medicine, or to answer questions.

Nov. 15. Urinary analysis: Sp. gr. 1008. Litmus papershows decided alkaline reaction. Heat and nitric acid test shows albumen to be absent; nitrate of silver test shows the chlorides to be wanting to a slight ex-

R -same.

During the next two weeks the temperature remained nearly stationary at 96°, and he had cramp-like pain in the throat and pains in the chest and head, which were affected by changes in the weather.

Nov. 29. Temperature 961°. This is the first day that we have been able to get any intelligible history. and the following is all that can be elicited:

Born in Germany. Has been in this country 35 years. Since quite a child he has been troubled with pain in the head and want of memory. Sometime ago, while following his trade of carpentering, he received a fall and struck on the back of his head. We are unable to ascertain at what time this occurred, or what followed.

Dec. 20. The patient continued to decline and died.

#### AUTOPSY.

Height, five feet five inches; head, 22 inches; chest, 32 inches; abdomen, 29 inches. Rigor mortis marked. Patient greatly emaciated. Brain, 2 lbs. 18 oz. Skull-cap: well ossified. Dura mater thickened. Evidences of old pachymeningitis. Lateral ventricles

Skull-cap: well ossified. Dura mater thickened. Evidences of old pachymeningitis. Lateral ventricles normal. Optic tract enlarged. Medulla oblongata disintegrated. Slight congestion of left anterior lobe. Well marked congestion of pia mater in the neighborhood of the fourth ventricle. Light sclerosis in the white substance immediately underlying the optic tract;

with softening of the surrounding gray substance.

Right Lung: 16 oz. Strong pleuritic adhesions to
the mediastinum. External surface dark striated and slate colored. Cartilaginous deposit upon the apex.

Lung tissue perfectly normal.

Left Lung: 15 oz. Lower lobes almost black. Tissue shows a high grade of congestion. Same masses at apex as found in the opposite lung.

Heart: 94 oz. Heart substance normal. Slight thickening of the membranous portion of the mitral

Liver: 53 oz. Capsule non-adherent. Substance of

liver normal.
Stomach: Normal.

Large and Small Intestines: Normal.

Cause of Death : Exhaustion.

Autopsy held Dec. 21, 1882, by Drs. Jno, M. Foster, G. T. Stewart, and T. H. Hicks, Division House Staff.

#### A CASE OF DOUBLE HARE-LIP AND ITS POS-SIBLE CAUSE.

BY GEO. E. TYLLER, M.D.

I have met during the past week with an infant, suf-fering from double hare-lip and cleft-palate, the condi-tion being very similar to that described by Dr. Norton in the Feb. number of the MEDICAL TIMES.

The buccal and nasal cavities are continuous with each other throughout their whole length, even through the other throughout their whole length, even through the lip anteriorally, notwithstanding which the infant manages to nurse. As to probable cause in this case, when the mother was about five months pregnant, she became quite excited, one day, by the fact that a dog killed and mangled several pet rabbits that belonged to her children.

The nervous impression may have been increased by seeing some of the rabbits suffer before their death.

DIAGNOSIS OF ALCOHOLIC COMA .- Dr. R. O. Beard, in a valuable article on "The Differential Diagnosis of the Cause of Sudden Unconsciousness" (Chicago Med. Jour. and Examiner. June, 1882), says that "Dr. W. MacEwen, of Glasgow, Scotland, claims the demonstration of an absolutely pathognomonic sign of this affec-tion in the condition of the pupils, which, as far as my observation and inquiry have extended, has proved a reliable aid in the diagnosis of doubtful cases and the exclusion of any coincident injury or disease.

"In alcoholic coma undisturbed, he states that the pupils are invariably contracted, but that on the application of any external stimulus, sufficient to partially arouse the patient, they at once dilate, again relapsing into a contracted state as unconsciousness re-deepens. Dr. MacEwen reports the observation of fifty cases, of which number forty-eight answered perfectly to the test, contraction recurring in from five to thirty minutes after stimulation. The two exceptions to this rule after stimulation. The two exceptions to this rule proved, on subsequent inquiry, to have formerly suffered with disease of the iris, which had resulted in complete fixity of the pupils. This alteration is, I believe, characteristic of no other comatose condition, and is therefore, if supported by further investigation, an invaluable diagnostic sign."

NOCTUNAL INCONTINENCE OF URINE IN CHILDREN. A recent paper read hefore the Harveian Society by Dr. T. Robinson, has two homely hints that are of value, and

to which we desire to call attention.
"There is no doubt," he says, "that mothers and nurses are frequently to blame for this troublesome vice. Young people ought to be taken out of bed during the night and placed on a chamber, so as to excite their bladders to act." And again: "Fear will frequently prevent young people from rising in the dark to relieve

"If we instruct our patients to take up their children teachings of Hunt when they go to bed themselves, we shall do much, —Detroit Lancet,

even in quite young children, to arrest the natural in-continence of infancy, and no parent should allow children to sleep without a dim but sufficient light."

PRODROMATA OF PHTHISIS.—Dr. Coiffier (Lyon Médical, Dec., 1881) believes that when a clean tongue coexists with a pulse of eighty-five it is an almost certain prodrome of pulmonary phthisis. When found in persons between eighteen and thirty years of age, who seem to be in excellent health, he regards such co-existent symptoms as evidence that tubercular deposit has already occurred.

EUCALYPTUS.—This drug has been found by Mosler to have a marked effect in reducing the volume of the spleen. He found by accurate measurements that under the use of an extract of eucalyptus leaves the spleen decreased in all its dimensions. These experiments were performed on dogs, and would seem to indicate that preparations of eucalyptus are likely to be of value in the treatment of ague cake.—The Druggist.

DELIVERY OF THE PLACENTA.—In a brief paper read before the Kings Co. Medical Society (*Proceedings, Oct.*) Dr. Charles Jewett invites attention to the method and time of placental delivery. In conclusion he submits the following summary :

Use constant friction or uterine massage after the delivery of the head, for the double purpose of maintaining retraction and provoking uterine effort.

Supplement the uterine efforts, if need be, by com-

After the placental expulsion, continue friction until

retraction is complete and permanent.

Use ergot on the birth of the head to promote the prompt and perfect completion of the third stage.

Aim to deliver the placenta, as a rule, directly after, not before, the ligation and divison of the cord.

CLINICAL RESEARCHES AND EXPERIMENTS UPON THE PATHOLOGY OF ERYSIPELAS:—(Lyon Méd): D. Dupey-rat bears out the experiments of Dr. Orth, as demon-strating the parasitic nature of erysipelas. The conclustrating the parasitic nature of erysipelas. The conclusions with which he terminates his thesis are as follows: (1.) Erysipelas is due to a living substance strange to the organism, and capable of reproducing itself in the economy. (2.) This material or substance is a spherical bacterium, isolated, or united like beads, but always fixed. (3.) This immobility is a characteristic which he believes to be pathognomonic of the bacteria of crysipelas. (4.) This bacterium is the only one which seems to be able to produce erysipelas. (5.) This germ is incapable of flourishing in all subjects, certain individuals affording a more favorable soil for its development. (6.) A wound is necessary for the penetration of the germ into the economy. (7.) Artificial crysipelas can only be produced in animals by the specific bacteria. (8.) The serum of an crysipelatous bulla, deprived of its bacteria, cannot produce this exanthem.—N. Y. Medical

COLLES' VIEWS RESPECTING SYPHILIS. - Dr. McDon nell, (London Medical Record) gives the following as olles' principal discoveries in syphilis:
(1.) He establishes the opinion that secondary symp

toms are capable of propagating the venereal disease.
(2.) While showing that a child may receive the infec-

tion of syphilis by sucking a nurse affected with secondary symptoms, he cannot recollect a case in which the diseased nurse infected the child unless she had an ulceration of the nipple.

ation of the nipple.

(3.) He makes the important generalization (which Hutchinson has termed Colles' law) that a father cannot transmit syphilis to his offspring without implicating its mother. Colles also draws a distinction between the local ulcer and the infecting chance, contrary to the teachings of Hunter and other authorities of the period.

QUININE; ITS ACTION UPON THE HEALTHY EAR.—P. Guder (London Medical Record) gives the results of experiments upon the action of quinine. One gramme of muriate of quinine reduces the temperature of the ear 0.56 deg. Cent. (about 1 deg. Fahr.) within from two to two and a quarter hours. It lessens the capability of hearing a watch, or even ordinary conversation, within the same time. The author did not observe hyperæmia of the exterior auditory canal, nor of the membrana tympani, as described by Roosa. On the contrary, he saw; while the action of quinine was at its height, a decrease in color of the parts which had been red before. The temperature of the body falls in proportion to the temperature of the external auditory canal 0.5 deg. Cent. (0.9 Fahr.) within an average of two and half hours. There is no change of the pulse. Subjective sensations of hearing, disturbance of equilibrium, occurred in most cases after from one and a quarter to one and a half hours .- Detroit Lancet.

CLINICAL OBSERVATIONS ON BRIGHT'S DISEASE.-Dr. Arthur V. Meigs, in a paper on Albuminuria, summarizes his conclusions (based upon a study of sixty-

two cases seen in private practice) as follows:
"First. That in no ordinary, uncomplicated case of Bright's disease, should a prognosis of speedy death, or even of incurable disease, be given, for I have related cases in which the disease was chronic, lasting more than two years, and which ended in complete recovery, and others in which the person affected has

lived nine years.

Second. That dyspnea, usually taking the form of renal asthma, is much more common than is usually supposed, and when properly appreciated, is a valuable diagnostic sign of the disease; also that severe coryza is a complication or accompaniment, and has a diagnostic value

Third. That Bright's disease, as a cause of death, is

on the increase

on the increase.

Fourth. That it is a very common cause of the death of old people, probably being the direct cause of many deaths reported as of old age.

Fifth. That the passage of gravel, even when microscopic in size, but particularly when large enough to cause nephritic colic, is a prolific cause of the disease.

Sixth. That the occurrence of tube-casts in the urine, without, or in advance of, the presence of albumen, is very common, and vice versa, persons may die of Bright's disease, and the most careful examination fail to show any tube-casts, although there may be albumen constantly present in the urine,

That the abuse of alcohol is certainly a Seventh. cause of kidney disease, as proved by the case I have related, in which it has again and again caused hemorrhage from the kidney, with the temporary presence of albumen and tube-casts in the urine, disappearing again with the cossation of its consumption.". Cin. Lancet and Clinic, Nov. 11, '82.

TREATMENT OF PNEUMONIA BY THE INHALATION OF FIREATMENT OF FREEHOMA BY THE INMALATION OF ETHER.—Dr. Samuel W. Francis, of Newport, R. I., reports the successful treatment of acute cases of pneumonia by the inhalation of sulphuric ether. He says that, if seen early during the first stage, by inhaling ether for 30 minutes, every six hours, many severe and protracted cases of sickness would be arrested.

HYPODERMIC INJECTIONS OF STRYCHNIA FOR PRO-LAPSUS ANI.—Dr. Leonard Weber, of New York, inserts the needle into the cellular tissue parellel to the rectum, and about three-quarters of an inch from the anus, and injects one-twelfth of a grain for an adult. The operation is repeated every 48 hours till complete recovery takes place, and from four to eight injections are needed. The pain is not severe, and he has found no inflammation or abscess to result.

Rôle of the Pancreas in Diabetes,—M. Rémy (Le Prog. Med.) has experimented with rabbits in regard to the theories of the relation of the pancreas to certain forms of diabetes. Owing to the impossibility of maintaining a permanent condition of glycosuria in ani-mals, he cut off the action of the pancreas by means of a ligature of the canal of Wirsung; he never observed any sugar in the urine. In another series of experiments, he excised at one time the nerve branches of the solar plexus, and at another time the single filaments supplying the liver; no glycosuria followed. (T. M. S.)

PREVENTION OF OPHTHALMIA NEONATORUM.—The following method was employed by Credé in a series of 200 cases, and by three other physicians in another series of 400 cases: After the funis has been tied and the child's body bathed, the eyes are cleansed with water at the proper temperature, upon a small rag, and a single drop of a two per cent, solution of nitrate of silver is allowed to fall into each eye from the end of a glass rod. No single one of the children so treated suffered with ophthalmia during the first seven days of life. If the nitrate of silver was not applied at birth, the application should be made in the manner described as soon as the disease appears. It should be repeated subsequently, once a day, as circumstances require, and a small bladder of ice should be laid upon each eye.— N. Y Med. Jour. and Obstet. Review.

DEAF-MUTISM CURABLE BY HOMEOPATHIC REMEDIES.—In a recent pamphlet by Dr. Robert T. Cooper, of London, the question is discussed whether a restoration of the hearing is possible to those in whom that sense has been lost through disease—the loss of speech being secondary and contingent upon the deafness. A num-ber of interesting clinical facts are adduced from the author's practice, and the conclusions drawn from them are these:

1. Deaf-mutism, if taken in time, is no more incura-ble, nay, is even more curable than the ordinary form of

deafness of adult life.

2. Were proper attention paid to the affection, many who are now inmates of deaf and dumb asylums, might

be in possession of voice and hearing.

3. Whereas allopathy has never done anything for the treatment of this malady, it is, under properly applied homocopathy, a perfectly remediable and even curable affection.

A CURETTE FOR SCRAPING THE SURFACE OF THE BLADDER IN CHRONIC CYSTITIS.—An instrument devised by late Prof. W. H. Mussey, of Cincinnati, is described by him in a paper read before the Ohio State Medical Society and published in the Columbus Med. Jour. for September. It consists of a number twenty (American scale) solid steel sound, having a very long curve (in contrast with the so-called Van Buren curve, which is short and abrupt) and is used after the dilatation, to thoroughly scrape the surface of the bladder and remove much of the scrapings, after which the viscus is cleaned

and all remaining particles by irrigation.

In pursuing this treatment it is important to evacuate the bladder twice a day with the soft rubber catheter.

As a wash for the bladder, an emulsion of gum tenzoin is recommended, to which carboile acid, or boracic acid may be added in varying proportions.

VESICO-VAGINAL FISTULA CURED BY POSITION, is the title of a case published by Dr. T. J. Winn, in the Virginia Med. Monthly. The fistula occurred in a woman recently confined. She was told to assume the genu-pectoral position at intervals, thus allowing the urine to accumulate in the fundus of the bladder. catheter was used. A moderately strong solution of addium bicarbonate was used as an injection immediately after each urination. In twenty days the cure was com

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OF

MEDICINE, SURGERY, AND COLLATERAL SCIENCES.

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"A regular medical education furnishes the only presumptive evidence of professional abilities and acquirements, and other to be the ONLY ACKNOWLEDGED RIGHT of an individual to the exercise and honors of his profession."—Code of Medical Ethics, Amer. Med. Ass., Art. iv., Sec. 1.

Our practice is not "based on an exclusive dogma, to the rejection of the accumulated experience of the profession, and of the aids actually furnished by anatomy, physiology, pathology, and organic chemistry."

#### THE RESULT.

The Medical Society of the State of New York has distinguished itself again by adhering to its "New Code," in spite of the labored attempt to return to the old. This result was foreshadowed by the action of our County Society, which voted one hundred and fortyseven in its favor, to sixty against. The action thus aken will prove very important in its influence, and some of its events were sufficiently vivid to be recorded as memorable. The question before the State Society was that of rescinding the "New Code," and it required a two-thirds vote in order to accomplish it. There were two hundred and four members present, two-thirds of which is one hundred and thirty-six, but instead of that number only ninety-nine voted to return to the old, while one hundred and five voted for the "New Code"; thereby showing thirty-aix votes to spare for the latter, while the "Old Code" would have to obtain thirtyseven votes to effect its re-instatement.

It is evident from what transpired that the battle has only begun, and next year will see a greater fight than ever.

This decision will of course continue the alienation of the State Society from other Medical Associations on account of their conflicting codes. The American Medical Association will thereby learn of the prevailing sentiment in regard to ethics in this State at least, and of the persistence with which it will be adhered to, and it must either disfranchise for all time that large body of members who are amenable to the laws of this State, or else modify its own code to accord with the progressive sentiment of the age, an example of which has been shown by a majority of the members present at the State Society meeting.

Whatever the final verdict, progressive medicine and more liberal ethical views of conflicting interests, will have been the gainers. There is no way back to the old condition which the "New Code" changed, and the course must be onward and upward until the medical profession from an ethical standpoint occupies a position which shall command the respect of the world, which it has previously utterly failed to do.

In a recent discussion of the subject of ethics, Prof. Fordyce Barker hit the nail squarely on the head when he said that "exclusive dogmas are not confined to the Homosopathic school. They are found among many who belong to the old school, and many of these exclusive dogmas are far more dangerous than those of the honest Homosopathist."

Dr. John J. Mitchell in his presidential address has admirably grasped the situation, and has dealt with it fearlessly and in a most forcibly practical manner. We should gladly reproduce the whole of this excellent paper, did space permit, but our readers will be able to obtain some idea of his more salient points from the abstract in other columns, and such as desire can obtain the whole text in pamphlet form.

#### MATERIA MEDICA.

The fact is beyond dispute that the great advance in therapeutics during the past half century, and its elevation from crude empyricism to something like the dignity of a science, is owing, so far as drugs are concerned, to their careful and scientific proving, and the study and proper understanding of their dual action. This line of investigation has been so full of practical results, that, slowly it may be, but surely, it has changed the medical philosophy and practice of the profession throughout the world. The long list of combined remedies united in a single prescription and the crude and massive dosing in which the body is looked upon as a machine, and a very material one at that, are rapidly giving place to a wiser philosophy, in which small doses often repeated are found far more beneficial. The medical literature of the Old School is at present full of indications of a radical change of base in the line of therapeutics, a change of base which points clearly to their intention of absorbing the truths of the philosophy of the New School into the their own rank, as rational medicine.

The recent lecture of Dr. A. A. Smith on the frequent repetition of doses, delivered at the Bellevue Hospital Medical College by its Professor of Materia Medica and Therapeutics, is one which would be considered thoroughly orthodox in any Homœopathic medical college. He goes over a long list of remedies and without attempting to explain their action, he points out the immense advantage derived in almost every disease by giving them in small and repeated doses. Not a word is said of Hahnemann or Homœopathy as the advance men in the old school appropriate the results of investigations which have been carried on so patiently and with such wonderful results during the past half century. It is true these investigations are for the world, and are free

to all, but we have a great work to do if we would not see the men who have so long stood in antagonism to us, us in our own chosen path, The vast amount of material in the form of provings which we have gathered must be utilized in some better way than has yet been discovered if we would not have our Materia Medica a standing reproach to us from a lack of condensation and proper arrangement.

We are glad to see by the announcement, on another page, by Dr. Dake, Chairman of the Bureau of Materia Medica and Proving, American Institute of Homocopathy. that a step is to be taken at the next meeting of the Institute in the right direction. Dr Dake has associated with him an exceedingly able committee, representative men of this country and of Europe, and from the way in which they will handle the two drugs given them for investigation we are confident a model for a new Materia Medica can be devised clear and concise in its presentation of facts and thoroughly practical and scientific. In other words we shall have the principles of action of the drugs; the gold without the dross, the wheat without the chaff, Heretofore investigators have been driven away by the confusion of statement and useless repetition of symptoms, many of them thoroughly puerile and entirely unimportant. The longer he lives the greater the tendency of the practical physician to confine himself to a few great remedies. His repertory is small, but a careful study of the principles of action makes each drug, in his hands, a trenchant weapon in his combat with disease. The great work before us now is, the bringing together in a practical form the riches of our Materia Medica, leaving out of the list drugs whose action is ensured by other more comprehensive ones, confining ourselves entirely to those great remedies which experience has found so useful on a thousand battle fields with disease.

#### PHYSICAL CULTURE.

There is no doubt that physical exercise conduces greatly to health and long life, providing it is not excessive or unnatural.

There are many appliances used for promoting gymnastic exercises, but the most ingenious and scientific application of physiological movements, obtained by the use of a single apparatus, that combines the advantages of all other devices without possessing any of their defects, is made by Gifford Brothers, of this city.

This invention requires but little space, is strong, durable, reasonable in price, and equally adapted to the weak and the strong of all ages and both sexes; affording a never-ending source of benefit and amusement for children.

The apparatus is thoroughly complete. It exercises every muscle of the body, combining a great amount of curative, as well as preventative treatment. The attention of the profession need only be called to the variety of movements this apparatus combines to enable them to see at once that it will prove a valuable adjunct in the treatment of many diseases, and a great benefit to the overworked in our own profession.

The time has already come when we must have a more even balance. Let us reverse the present system after appropriating the fruit of our past labors, outstrip and have the physical development of the young go one step in advance of their mental training; they will then have not only vigorous minds, but vigorous bodies. The one who promotes this harmony is a public benefactor. Its great and growing need all will accord. It is the root from which the health, happiness and prosperity of the people of the present generation must grow, and it will be an inheritance worthy of the generations to follow. The beginning of this much needed reform has already begun, and too much praise cannot be accorded to the newspapers and magazines that have opened their columns to the subject of physical culture. It is the surest evidence that the people are becoming alive to its great importance. With a little more guidance, they will instinctively turn towards a more liberal and practical education. The press can do much to disseminate more light upon the subject of physical training with the general public.

Give us more time for recreative enjoyment-more leisure moments for both out-door and in-door exercises -and we shall ground the people upon a basis that will

be equal to the national necessity.

The new invention we have alluded to in this article has already given the subject of physical culture fresh impetus, and we are glad to see with what interest the profession in general are looking at the subject, and educating their patients to a realizing sense of its importance.

#### DEATH RATE IN NEW YORK AND BERLIN.

Berlin is considered one of the most unhealthy cities in Europe; situated on a vast plane with a river flowing through it, whose waters are so sluggish that they scarcely move, the facilities for natural drainage are by no means good. The facilities for natural drainage in New York are unequaled by any large city in the world. Washed on all sides by vast rivers, through which the tide ebbs and flows, with a gentle descent from the back bone of the island both ways, one would suppose there would be no trouble in perfecting an almost perfect system of drainage. The population of New York is about the same as Berlin, the former city having a population in 1882 of 1,276,000, and the latter of 1,174,293. There were in Berlin last year, according to the report of their health department, 30,465 deaths, and in New York, from the report of our own health department, 37.924. The comparative table of deaths from different diseases, which we give, is one which we trust our citizens will carefully study:

Berlin	New York.
Measles	
Scurletina	
Small-pox	5 Small-pox 259
Diphtheria	1,904 Diphtheria
Typnus	1 Typhus 65
Wnooping Cougn	292 Whooping Cough 658
Consumption	3,791   Consumption

The comparative cost of governing the two cities would form an interesting item. We can hardly look for any material change in the enormous death rate of the city, and the frightful taxes which cause the herd-

ing of the poor together like cattle in cellars and tenement houses, until there is a radical change in the administration of the city affairs. Give us a one-man power, an autocrat, if you please, who shall be responsible to the people for his trust, and hold him to a strict account. Sweep away the commissions, and let the appointments of the heads of the different departments be through a supreme chief, from whom all power radiates. Then there would be harmony. The government would move on like a well-oiled machine. The cost of administration would be reduced to a minimum, for one hand would move the springs and indirectly control every department. Now, no one is responsible, and the tax-crushed citizen, as he looks upon the yearly increase of expenditure, folds his hands in apathy or despair. Under a proper administration of affairs, the death rate of the city could easily be reduced one-half, and New York rank as not only the healthiest, but one of the cheapest cities for a residence in the world.

#### DR. BEARD'S ESSAY.

The world certainly moves-and in the right direction. In a publication of such standing as the Popular Science Monthly, appears an article in the Feb. number, from Dr. R. O. Beard, upon "The Schools of Medicine," which aims at being perfectly just to both the old and new (homosopathic) school. Dr. B. writes in behalf of suffering humanity, and his criticisms upon both schools are not only just, but intelligent and very much to the purpose, as a few quotations will show. He commences by saying that "Nothing is so popular as prejudice, and no prejudice so popular as that resting upon a supposed scientific basis, or backed by reputed scientific authority. Always obstructive to the spirit of progress, it is peculiarly so when related to a subject so closely concerning the interest of the people as the study and treatment of disease." \* \* \* "Rooted in the professional ignorance and bigotry of almost a century ago. fostered by the bitter rivalries and exclusivisms of opposing theorists, these differences have been taken up and fed by popular opinion, until they seriously embarrass the progress of medical knowledge, and tend to destroy all faith in the science and art of healing. The medical fraternity at large, and of both schools alike, is responsible for this unfortunate condition of affairs. When professional men, who, supposably, represent the best phases of liberal thought and scientific culture, lend their names to the partizanship of mere theory, and array themselves under sectarian titles which signify their adherence to an exclusive dogma, it is small wonder that the laity should follow in their footsteps, and cast their views into the yet narrower mold of unreasoning prejudice. And, as professional hands have sown this seed of error, it is they who must gather its barren harvest, and uproot the tares of false opinion from the popular mind."

Dr. Beard refers to the recent agitation of the question of consultations in New York. He is quite right in saying that it "presents a good opportunity of offering to the general reader a few facts which may serve to saldogma, to which, as such, they can no longer honestly

illumine existing error, and prepare the way for the appreciation of some generally unrecognized truths.

He does not waste time in more than a bare allusion to self-interest as an obstacle to any concession of one school to the other; but has much to say of the violent prejudice which exists with both the profession and the public, to the great injury of all concerned. To this prejudice he thinks the continued use of the terms "homosopathic" and "allopathic" have largely contributed, and that the time has come for abandoning them. He says of homoeopathy, "In its earlier day it represented a group of dogmas, which most of its younger disciples disown. Infinitesimal dosage, increased potency by means of dynamization, the unification of disease, etc., have ceased to be essential planks in the homœopathic platform." Again, "The homœopathy of to-day has also shaken from its feet the dust of more than one worthless theory; although within its ranks are still numbered some so-called 'high dilutionists,' its leaders have long ceased to insist upon infinitesimal dosage as an essential principle of treatment." In this there is little or nothing to complain of. In what follows there is apparently no lack of disposition to be accurate and fair to the homoeopathy of to-day. "Not a few of its representative men administer many of their drugs in crude form, as the rule rather than the exception of practice. If it still clings to its central dogma, its principal adherents no longer claim for it the respect or merit of an universal law." Facts do not sustain the first of these statements; but still every one is in freedom, and it is his duty to give medicine in such doses as he thinks will be best for the patient. The old school will, in due time, learn that the similar medicine produces its best effect, not in infinitesimal, but in small and non-poisonous doses. As to the law of curing by similars being "universal," we need not waste time in disputing. Practically the question with every intelligent homocopathist must be, is it applicable to the case in hand? If it is not, he fails in his duty if he does not try to avail himself of all the resources of medical science for prolonging life or mitigating suffering.

Dr. B. admits the truth of the charge, that homosopathists have contributed little to medical knowledge ontside of therapeutics, but says, "In this one department of medical science, the profession has received at its hands an incalculable benefit. It claims, and for the most part rightly, the credit of advancing, directly or indirectly, the study of the physiological action of drugs, as related to the alleviation and cure of disease. The careful experiments thus set on foot have thrown a light upon the selection and intelligent use of remedies. which has largely revised the old system of therapeutics. Homocopathy has, undoubtedly, given to the world the revelation of more than one valuable truth, and the profession and the people alike owe to it, in the persons of its advanced thinkers, the gratitude of respect and recognition."

The standing complaint against homoeopathists is their continuing a "name and title suggestive of rigid exclusivism, \* \* and their adherence to a univeradhere. Why should it not be possible for a guild of men, interested in so grand an object as the relief of suffering and the conservation of human life, to join cordial hands with their fellow-laborers in a common cause, and content themselves with the unequivocal name of physician, and the honored and honorable title of Doctors in Medicine" All this is wholesome, if not flattering talk. Referring to the liberal action of the New York State Medical Society (since Dr. B.'s writing fully endorsed by the New York County and the State Medical Societies), he says, " It has but constituted itself the vanguard of a movement which will soon be followed by all liberal men in the profession, and must ere long sweep away those petty obstacles to the progress of medicine, which, causing the disunion of its disciples, have limited its usefulness, weakened its experimental conclusions, and brought upon it the popular reproach of disagreement."

## BIBLIOGRAPHICAL.

MANUAL OF GYNÆCOLOGY. By D. Berry Hart, M.D., F. R. C. P. E.. Lecturer on Midwifery and Diseas of Women, School of Medicine, Edinburgh; Late of Women, School of Medicine, Edinburgh; Late Assistant to the Prof. of Midwifery, University of Edinburgh; Late President of the Royal Medical Society, etc., and A. H. Barbour, M. A., B. Sc., M.B., Assistant to the Prof. of Midwifery, University of Edinburgh; Late President of the Royal Medical Society. Vol. I, with eight plates and one hundred and ninety-two wood cuts. New York: Wm. Wood & Co., 1883. Pp. 314, octavo.

This work is the initiatory volume of "Wood's Li-brary of Standard Medical Authors," for the current year, and as its title indicates, it is a "manual" of the subject of which it treats, for which purpose it will

be found quite convenient.

The text includes bibliography of our literature to date, profusely illustrated by plates. Of therapeutics, we find on page 168, in the treatment of "Affections of Peritoneum and Connective Tissue" the following :

"To bring down pulse and temperature, drop doses of aconite are of great value. They should be given every quarter of an hour until the pulse is reduced and sweating brought on.

We should be glad to see more of this mode of prac-tice introduced into works of this class, and we venture to assure the book makers that their labors in this di-

rection will be appreciated.

There are a host of medicines to which this school of writers pay no attention, and a careful study of them, as in the case of aconite, would lead to the adoption of some, and thus enrich the field of therapeutics.

We are glad to see that the enterprise of Messrs. Wood & Co. has been sufficiently rewarded to induce them to continue the publication of this serial litera-ture, which is destined to form a complete library of standard works. The publishers will send prospectus on application.

A DICTIONARY OF MEDICINE, INCLUDING GENERAL PATHOLOGY, GENERAL THERAPEUTICS, HYGIENE AND THE DISEASES PECULIAR TO WOMEN AND CHILDREN. By various Writers. Edited by Richard Davis, M.D., F.R.S. New York: D. Appleton & Co.

This large volume is something more than a mere dictionary of medicine. It is really a treatise on systematic Dr. Mary Putnam medicines in which the articles on the more important teresting reading.

subjects constitute monographs in themselves. The diseases are discussed in alphabetical order. The description of each includes an account of its setiology and anatomical character; its symptoms, course, duration and termination; its diagnosis, prognosis and general treatment. The articles on general pathology and hygiene are clear and concise, and written from the most advanced standpoint of our present knowledge. The discussion of general therapeutics would be improved by a more comprehensive acquaintance with the dual action of drugs. The diseases peculiar to women and children are discussed under their respective headings, both in the aggregate and in detail.

The work is so full of information, compact and boiled down, of just the kind which the busy physician wishes for ready reference, that it will naturally find its

place in almost every medical library.

SCROFULA AND ITS GLAND DISEASES, AN INTRODUC-TION TO THE GENERAL PATHOLOGY OF SCROFULA, WITH AN ACCOUNT OF THE HISTOLOGY, DIAGNOSIS AND TREATMENT OF ITS GLANDULAR AFFECTIONS. By Frederick Treves, F.R.C.S. Eng., Assistant Surgeon to and Senior Demonstrator of Anatomy at the London Hospital; Late Wilson, Professor of Pathology, at the Royal College of Surgeons. Philadelphia: Henry C. Lea, Son & Co., 1888. Pp. 78.

This brockure belongs to the ten cent series of this publishing house and is well worthy one's possession.

SECOND ANNUAL REPORT OF THE STATE BOARD OF HEALTH of New York. 1882. Pp. 726.

This report covers a vast amount of research and valuable information. Of the more important may be found articles regarding the "Prevention and Control of Contagious Diseases"—and we would that every of Contagious Diseases—and we would that every practicing physician were familiar with its state-ments—an elaborate paper on "School Hygiene," essays on "Drainage, Sewerage, Topography, Chemi-cal Examination of Drinking Water, Apparatus for testing inflammable oils, Reports on Adulteration of Food and Drugs," etc., etc., much of which we should be glad to abstract for our columns, would space permit. We have no doubt copies of the report may be obtained by addressing the Board at Albany.

BRITISH HOMEOPATHIC PHARMACOPEIA. Published under the Direction of the British Homœopathic Society. Third edition, 1882. Pp. 456.

The first edition of this standard work appeared in the year 1870, and was ardently received by the profession because of the universal need of it. In 1876 a second edition was issued which was long since exhausted, and now we have a third brought down to date. The reliability of this publication needs no word of comment from us, and its scholarly bearing is apparent to the most casual observer.

In The North American Review for March, Moncure D. Conway contributes a very striking study of Gladstone as a man and a statesman, showing how even the more or less sinister moral and intellectual traits of his nature, quite as much as his pre-eminent native force and elevation of character, conspire to make him the foremost Englishman of his time. There is also a symposium on "Educational Needs," by Prof. 6. Stanley Hall, Prof. Felix Adler, President Thomas Hunter and Dr. Mary Putnam Jacobi, together with other most interesting reading. THIRTY-FIRST ANNUAL REPORT OF THE DIRECTORS OF THE N. Y. OPHTHALMIC HOSPITAL for the year ending September 30, 1882.

From this report we find that the institution has treated during the period eight thousand, nine hundred and forty-two patients, an increase of fourteen hundred and fifty over the previous year—that it is indebted to its treasurer in the sum of over two thousand dollars, besides a debt of forty thousand dollars incurred in the purchase of additional property; and the managers ap-peal for aid in the liquidation.

The directors "refer with gratification to its increased

usefulness during the past year."

## OBITUARY.

## PROF. ROBERT J. McCLATCHEY.

WHEREAS, It has pleased an all-seeing Providence to remove from this life, Prof. R. J. McClatchey, and WHEREAS, we, the undersigned members of the Class 1882 of the Hahnemann Medical College, of Philadelphia, believing that the other members of the Class are too widely separated to take any concerted action, and

knowing that they share with us the feeling we express, Resolved, That the student has lost an invaluable teacher and friend, who practiced the greatest self-denial in so generously imparting his own experience

and the fruits of a life-long study.

Resolved. That he is destined to live forever in his

valuable literary contributions as well as in those hearts to which he disclosed the possibilities of medicine and made glad by the genial exercise of his professional abilities.

Resolved, That the high esteem and great reverence we feel for the memory of Professor McClatchey enables us to deeply sympathize with his family in their great

Resolved, That a copy of these resolutions be transmitted to the family and published in the Hahnemann Monthly and New York MEDICAL TIMES.

Thos. H. Hicks, Jno. M. Foster, R. K. Fleming, B. Sleght, and Geo. T. Stewart, Homocopathic Hospital, Wards Island, N. Y.

Feb. 17, 1883.

#### IN MEMORY OF DR. PEER.

Doctors Fowler, Schmitt and Spencer were appointed a committee, at the regular monthly meeting, on Jan. 16, of the Monroe County Homocopathic Medical Society, to draft resolutions expressing the Society's loss by the death of Dr. Geo. W. Peer. The committee have prepared the following:

pared the following:

WHEREAS, It has pleased a most wise providence to remove from our Monroe County Homocopathic Medical Society one of its oldest and most valued members, in the person of Dr. George W. Peer, Resolved, That we place on record our testimony to his virtues as a true friend and cultured physician.

Resolved, That while mourning his loss, we are comforted by the thought that God, in His goodness, spared him to us many years, and that, while we extend to his bereaved family our heartfelt sympathies in their great affliction, we would remind them that not only we, as a society, but the whole community have suffered an irreparable loss, and that those who have received the benefits of his professionni skill will ever call for blessings on his memory. Resolved, That these resolutions be entered on the books of the Society, and that the secretary be instructed to turnish an engrossed copy to the family of the deceased, and copies for publication in the daily papers and leading homocopathic medical journals.

#### ROBERT C. SMEDLEY, M. D.

Dr. Robert C. Smedley, M.D., died at Westchester, Pa. January 2 He was a homoepathic physician of prominence, and at the time of his death was engaged on a history of the underground railroad system.

## CORRESPONDENCE.

#### OUR LONDON LETTER.

MESSRS. EDITORS: -The new British Homoopathic Pharmacopæia has just come out, close on the heels of its American rival. I have not yet had time to examine it carefully, but it appears to be, in many respects, an improvement on its two predecessors, and the *Pharma*copaia committee, under the presidency of Dr. Drury, deserve the thanks of their colleagues. It will be noticed that two preparations of tincture of aconite are decided to be made—one from the flowering tops and leaves, and one from the root. The former, Dr. Hughes says, is passably efficient in cases of fever, but the latter is superior to it in cases of neuralgia. The provings were made, and a tincture of the whole plant, whilst poisonings have resulted chiefly from Fleming's tincture, which is made from the root, and it is in them that neuralgic pains have been most marked. No account is taken of nosodes in the Pharmacopeia.

The friends of the late Dr. Bayes are collecting funds to raise a memorial to his memory. This is most fitting. It is doubtful, however, whether sufficient will be subscribed to endow a hospital ward to be called after his name, which is the proposal started. At the present rate of cost per bed this is not easy. To endow a single bed does not cost less than £1,000. To endow a male ward of six beds would, therefore, require upwards of

£6,000.

The proposed scheme for incorporating the London School of Homeopathy has been abandoned for the present, and is not likely to be again revived. The success of the school has not been a very prosperous one in the way of attendance on the lectures, the deterrent forces proving stronger than the attractions. This may partly be accounted for by a growing dislike on the part of atudents for lectures of any kind, now that text books so largely take their place. It is probable that clinical lectureships will largely supplant much of the present systematic lecturing which is nearly all to be found in books, if, indeed, it is not read almost straight out of books by the lecturers themselves,

There have been numerous vaccination fatalities of late in various parts of the country. The result of the Government inquiry held at Norwich, on the deaths of eight children from vaccination, was not very satisfactory. The most plausible explanation came from the medical officer of the Local Government Board, who added a note to the report of the commissioners in which he endeavored to trace the erysipelatous infection to the washed. This may be so, but it will not account for the death of an infant born at the 8th month in St. Pancras workhouse, and vaccinated when only a week old. The arm swelled, the inflammation appeared, and death took place three weeks after the operation. In spite of this, the medical representative of the Local Government Board, at the inquest, said he saw no objection to vaccinating the newly born! It is scarcely to be wondered at that anti-vaccinators become frantic in the face of such blind stupidity as this. The medical profession gains nothing by shutting its eyes to the serious nature of the disease vaccinia, and its possible sequels, whilst looking out at its protective merits. persons who are allowed to vote ought to be allowed to choose in this case, as in others, between the disease and the remedy, or rather the risk of disease and the prophylactic.

There are not wanting signs that a sad debasement is coming over the professional mind, and the mental fare purveyed by the Lancet and Medical News and Gasette, of January 20, for the medical public, is enough to make every thinking reader blush for his profession. The former journal entertains its readers with all the

loathsome details of a successful attempt to inoculate a male monkey with syphilis, and an attempt to cause a male monkey with syphilis, and an attempt to cause him to spread the infection. What, in the name of all that is pure, humane, and scientific, is the good of an experiment of this kind? and what but filthy curiosity can cause any medical man to take pleasure in contemplating it? The Medical Times and Gazette regales its readers with an account of experiments on rabbits, guinea pigs, etc., with the lochial discharges of women. This delightful substance was injected into the cornea and other parts of many unfortunate animals, with the expectation of getting from them some definite results. These, as the journal confesses, were not forthcoming; and seeing the small analogy that exists between a woman and a guinea pig, and absolute want of analogy between a puerperal woman and a healthy guinea pig, nothing else could be looked for by a truly scientific It is not pleasant to think of such nauseous stuff as this being swallowed by readers of these journals

without a sigh.

Another unpleasant feature in matters professional has been too prominent of late. It is usually considered that the relation between doctor and patient is one of absolute confidence, but it seems that this does not apply to eminent persons and their medical advisers. Whenever a specially eminent person falls sick there is sure to appear in one of the medical papers a scientific account of his case. This is immediately copied into the daily papers, and the patient, if he survives, has the satisfaction of knowing, and of knowing that all his friends and enemies know, all the ins and outs of his malady, all the little weaknesses of his constitution, and what are his life prospects and the prospects of his descendants, should he ever have any. And when the unfortunate person of eminence is sick unto death, he can comfort himself with the thought that all the little trivialities and unpleasantnesses that attend on dissolution, and that should be reserved for the eye of tender sympathy alone, will be faithfully chronicled and laid open to the curious gaze of the world at large. And that is not all—the gaze of the curious is admitted to the autopsy, and every scar exposed to its greedy scrutiny. The crowning atrocity of this kind is found in one of the journals which discusses with the greatest callousness whether a late celebrity was or was not syphilitic! Good heavens! What can it benefit anyone to know Is modern science to rob death of its chastening sanctity? Death, the mighty healer which relieves poor humanity of all the diseases we doctors fail to cure! Where we cannot cure diseases, let us at any rate not make its burden heavier to bear; and when we can no longer ward off death, let us not invest it with horrors that it does not own.

Our winter season thus far has been a curious one. November was cold and December opened with cold weather and a notable snow storm followed by frost. This was of short duration, and before Christmas mild, spring-like weather set in. The new year came in warmer than many days of last June. Cold, dull weather succeeded, calm on the whole, with occasional heavy gales. We are being constantly saturated with moisture and the streets are in a state of filth indescribable. February opens cold with very heavy gales and a drenching rain Skaters, this year, have had to content themselves with the pleasures of hope.

Yours fraternally, JOHN H. CLARKE, M. D.

15 St. George's Terrace, GLOSCESTER ROAD, LONDON, S. W., Feb. 2.

#### AN OLD FOGY'S REMONSTRANCE.

In the January number of the TIMES Dr. H. W. Taylor fulminates as follows: "We must without delay get vid of all dynamizationists and high potency men. They rid of all dynamizationists and high potency men. They are not of us or with us. They constitute the impedi-

menta to the onward march of our school. They are the Jonahs of our voyage. Were it not for their pernicious doctrine the regular school at this day would have no ground for objection against homospathic practitioners," etc., etc. Now, we have just been perusing two recent utterances on the subject of "Medical Regularity," addressed to the general public, by two representative men of the "regular profession," and in neither of them do we find a single sentence confirmatory of the assertion we have emphasized above. To be sure, both of these writers belong to the advanced and liberal section of the old school, but all the more safely on this account may their sentiments be taken as indicating the goal to which that school, as a whole, is inevitably tending. One of them, Dr. David Hunt, of Boston, speaks as follows in the North American Review, for January last :

"The principles of medical regularity are founded upon the relations of the physician to science. History shows the culture of science has greatly improved the healing art, and experience has taught us the necessity of organizations for caring for this culture; we have learned by experience that the more remote claims of science are apt to be sacrificed to the selfish individual ends which the struggle for existence forces upon us all; hence, as man has organized in society to protect his higher interests from the dangers of individual selfishness, from barbarity, so the medical profession has formed associations for the purpose of protecting itself and humanity from the injury which neglect of the claims of science surely causes." Taught by the same experience, we have found that the culture of science is incompatible with the support of any dogma; we have found that if the dogma were true, making it an object of special care or reverence, takes it out of democratic relations with other truths, and so injures it at the same time that it injures us by influencing us to unduly neglect or favor other truths. Here, then, are the simple principles, upon which a claim to medical regularity is properly based, and, in accordance with these principles, a regular physician is a member of an organization whose aim is the culture of science or truth as a whole. these fundamental truths are not universally recognized is proved by a writer in a recent number of this review, who defines a regular physician as "a graduate of a reg-ularly chartered medical school." Many diploma facto-ries are regularly chartered, but the graduates of such institutions may have learned nothing of medicine. The same writer illustrates the influence which a dogma, true or false, may exert upon the relation of a physician true or late, may exert upon the relation of a physician to science. In speaking of the law similia similibus eurantur, the writer says: "Hahnemann believed, his followers believe, that the Almighty, having given us medicinal substances which, when taken into the system, produce, in every instance, each a distinct and separate action, he, at the same time, gave us a law for the application of these substance is the polication of these substances in the care of disease."

Most botanists, geologists and zoologists teach us that God gave us animal and vegetable life in a very primitive condition; that from this beginning He permitted life to evolve and specialize itself, that in this process there was a most complex action and reaction between life and its environments, which has been going on for uncounted ages. Saying nothing as to the truth of this hypothesis, it is obvious that one cannot be impartial in judging of it if there exists in his mind an a priori belief in a God-given law of similars, for it is not possible to believe that the fauna and flora of successful geological ages have varied in every respect, in themselves and in their relation to each other, and still have maintained

just this one relation expressed by the law of similars.

Not one word here (or anywhere else in the essay) in denunciation of Dr. Taylor's bête noir, dynamization.

No! it is the great distinctive and essential principle of homocopathy at which Dr. Hunt directs all his blows. It is the Hahnemannian law of similars which he requires us to relinquish as our chief guide in therapeu-tics before we can be welcomed back into the orthodox

scientific fold. Dr. George O. Beard, the other authority to whom we refer, is even more explicit, and less rigid in his terms. In the *Popular Science Monthly* for February he says: "Homeopathy does not now possess in toto its original significance. In its earlier days it in toto its original significance. In its earlier days it represented a group of dogmas, which most of its younger disciples disown, infinitesimal dosage, increased potency by means of dynamization, the unification of disease, , have ceased to be essential planks in the homocopathic platform. According to more recent interpreta-tion, it may be defined as a system of medicine based upon one theory, simila similibus curantur, or the doc-trine of the similarity existing between the physiologifrom widely separated points, the two schools have steadily travelled forward along paths set in inevitably convergent lines. Although within its ranks are still numbered some so-called high dilutionists, its leaders have long ceased to insist upon infinitesimal dosage as an essential principle of treatment. Not a few of its representative men administer many of their drugs in crude form, as the rule rather than the exception of practice. If it still clings to its central dogma, its principal adherents no longer claim for it the respect or merit of a universal law. That it serves as a good indication for the use of certain drugs, in the treatment of many conditions of disease, few careful students of materia medica and therapeutics will deny. Witness, as instances, the physiological as related to the curative action, in some particulars, of arsenic, ipecacuanha, turpentine, nux romica, and its alkaloid strychnia and camphor. Explain the action in any way we choose-as the substitutive, is the primary differing from the secondary effects of the drug, etc.—the relationship of similarity, however problematical, its value, still remains. A careful study of the course of treatment commonly pursued by leading practitioners, and recommended by the highest authorities in the two schools, reveals the fact that, in eighty selected forms of disease, representing maladies of every type and every stage, six-tenths of the remedies employed by these supposedly rival schools are identically the same in kind, and differ only in respect of dose. The variance is no greater than probably exists between the respective methods of practice of any two physicians of either school. Between homeopathic and regular physicians there is but one legitimate ground of quarrel and herein the latter have sufficient cause for complaint-namely, the continuance, by their old-time opponents, of a name and title suggestive of a rigid exclusivism indicative of their supposed arrival at the ultima thuls of medical research, and their adherence to a universal dogma, to which, as such, they can no longer honestly adhere."

Here, not only is the slightest possible reference made to what Drs. Taylor and Paine are so incessantly denouncing as the only remaining barrier between the schools, but it is distinctly denied that any such barrier exists! Dr. Beard does not, like his Boston colleague, ask us to surrender a principle; he merely appeals to us discontinue the second surrender as principle; ask us to surrender a principle; in metal, appears to discontinue the use of a name, urging as a reason (with a comical naïveté) that the people, after having tested our mode of practice, during some fifty years, have contracted (to use his own words) "an unfortunate prejudice" in its favor, which leads a large and constantly increasing number of them to prefer calling in a homocopath when they know where to find one; and as this, of course, has come to act very injuriously upon the "pocket of the profession," all our signboards ought to be taken down. If this were only done, the "scientific" gentlemen have appropriated without acknowledgment so many of our remedies, and have learned from us to exhibit them in so acceptable a form, that they might have some hopes of holding their ground against us; but as for this fear-ful bugbear of high potencies, which Drs. Taylor and Paine are fighting so valiantly, the old school authori-ties, it is plain, don't wish to take any particular notice of it. The simple fact is, that, after trying in vain for

two generations to stomp out homosopathy, the "regular" profession finds itself compelled to adopt an insidi-In profession finds itself competited to adopt an insul-ous policy of obsorption. This policy Drs. Paine and Taylor, by the course they are pursuing, are doing their best to promote—unconscious, doubtless, that the suc-cess of their endeavors would very possibly involve the extinguishment, the annihilation, of the new school, and the end of all medical progress in the direction first pointed out by Hahnemann. "Those terrible dynamizationists wouldn't in the least deter the 'regulars' from swallowing us; but they undoubtedly prevent ourselves from submitting to the process of deglutition as readily and gracefully as is desired. Therefore, the dy-namizationists must be cut off." This, and nothing else, is what the Paine-Taylor demand really amounts to.

The "internationals," consequently, without reference to the truth or falsity of their peculiar doctrines, are really performing a most useful, in fact, an absolutely necessary office for our whole fraternity. their obstinate conservatism, or fanaticism, whichever their obstinate conservatism, or innaticism, whichever me may choose to call it, the purpose of our ancient ene-mies would probaby be speedily accomplished, and hom-copathy cease to exist in any definite or recognizable form. We hope, therefore, that despite the insensate warfare which is being waged against them our trans-cendental brethren may be permitted to continue their labors—within and not without the organization of which they are such effectual safeguards—at least, until, in the language of Dr. Taylor himself, "regular medicine" shall have "made two unequivocal concessions, viz., the open acknowledgment of similia similibus curantur, as the most generally available of therapeutic maxims; the other, that to Hahnemann and his followers regular medicine is indebted for this newly acquired property of the regular profession." We quite agree with Dr. T., that then "there will be no longer use for separate organizations and separate schools of medicine." But the quotations we have presented clearly show that that time is yet far from having arrived.

## SOCIETY REPORTS.

#### STATE MEDICAL SOCIETY.

This Society held one of its largest annual sessions in Albany, February 7th and 8th, with President Harvey Jewett in the chair, who addressed the meeting substantially as follows:

He referred to the enthusiasm and rapid advances in every department of literature and science, which characterized the present age, and spoke of the possibilities of future achievements in the art and science of medicine. The steady progress of the last half century was referred to as a proof of an amazing advance. The failure of legislative enactments to abate quackery were spoken of and the statement made that whatever is done must be done through individual organizations. The profession was competent through its representatives in the State and county societies to establish what shall be the standard of attainment of those who are to be received into the ranks. The speaker said that a more complete and thorough preliminary education of the young men who desire to enter upon the study of medicine was the first step necessary in advancing the cause of medical science. A much higher standard of medical qualifications before the granting of a diploma is universally conceded and acted upon by the leading medical colleges in the country. These requirements, if carried out, will, in the future, tend to bring about the desired result. Reference was made to the graded

The work of the State and National Boards of Health was commended, but it was stated that the work of the National Board was practically suspended by the remarkable disregard of the public health on the part of Congress in withholding supplies to carry on their labors. The subject was recommended to the consideration of the society for their active consideration. The speaker then took up the matter of the new code of ethics, to which he devoted considerable attention. He said that the new code had not been received by the profession or the medical press, in this and other States, with cordiality or favor, but, on the contrary, with the most outspoken and emphatic opposition, and a year's consideration had greatly magnified the views of the profession in reference to the measure. The objection able part of the new code consisted in allowing consultation with any legally qualified practitioner of medicine, as not derogatory to the interest and dignity of the profession, or in cases of emergency, where such aid is required upon the broad ground of common humanity. The advocates of the code hold this is only permissive and not obligatory, and the society should at this meeting consider the subject on its merits, and act as they may deem most conducive to the welfare, dignity and interests of the medical profession of the State.

On motion of Dr. E. R. Squibb, the society then resolved itself into Committee of the Whole on the reso lutions presented by him at the morning session, and which were the special order for the evening. Dr. Hutchins, of Brooklyn, who handled the gavel as if he had enjoyed prior experience with it, was called to the chair.

The resolutions offered by Dr. Squibb were as follows: Resolved. That all the action taken at the annual meeting in 1881, in regard to changing the Code of Ethics, be repealed, leaving the code to stand as it was before such action was taken.

Resolved, That a new special committee of five be nominated by the nominating committee of the society, and be appointed by the society to review the Code of Ethics, and to report at the annual meeting of 1884 any change in the code that may be deemed advisable.

Resolved, That the report of the committee be discussed at the meeting of 1884, and be then laid over for

final action at the meeting of 1885.

Dr. Squibb said that in assuming the responsibility of offering them he felt justified by the law. He said the act incorporating the State Society the first section of which he contended legislated county medical societies into existence, whose delegates composed the State organization. Under this authority both the primary and secondary organizations were established and the primary organization became the supreme authority for the regulation of the practice of both the county and State government. When there was need for change there was but one way to effect it. It must originate in a representative body and be submitted to the primary organization for consideration before being finally acted upon. That is what these resolutions contemplate. In 1881 a committee of five was appointed, which in 1882 reported a substitute for the proposed changes, which contained a fundamental principle. This substitute was adopted, thus revolutionizing the principle without waste or consideration of the primary organization.
Where it is necessary in some respects, it is revolutionary in others and subversive of principle. We have now no power under the law to make constitutional amendments, and if we have no power such amendments should be reversed. If this argument was not sufficient, forty out of the sixty counties had condemned the action of the State Society in adopting the new Code of Ethics, and in the remaining counties no action had been taken. In offering the resolutions the mover only advocated the and after first being submitted to the American Medical Association, the needed reforms may be effected.

Dr. Roosa next obtained the floor, and made a stirring argument in favor of allowing the new Code of Ethics to stand. He said that the argument of the distinguished gentleman (Dr. Squibb), who had for the past year inundated the State with printed arguments against the action of the society, merited from those who cannot agree with his conclusions most respectful considera-tion. We regret we cannot stand with him, and we regret to see him devoting his great abilities to matters pertaining to the seventeenth century. The argument he presents, if led to its logical conclusion, would disintegrate the State Society and blow it to the winds,

The notion that these county societies may come here and assert the right to secession was decidedly wrong, and the State Society has the inherent right to call any subordinate society who may revolt from the by-laws. Many of the members are entirely at variance with the society, and it was not right that the great New York County Society should have no more voice or influence in the councils of the State Society than the little society of Allegany county. The action in adopting the new code was not taken in any packed convention of specialists. It was taken by a convention only equalled by that of to-night. There had been no unfair advantage of any kind, notwithstanding the assertions to the contrary. It was said we have a union with the American Medical Association, which compels us to obtain the consent of that association before we make any changes in our code. Let me state distinctly, we recognize no allegiance to the American Medical Association except fraternal regard. It is not an incorporated body, and in all its history has taken no such position in the world as we have taken. If there had been any relation existing between us, we would simply have nothing to do but separate. "Revolutionary" is the adjective used by the gentleman in speaking of our action. It may be added that it was through revolutions that great reforms and great objects were attained. The New York and Kings County Societies had left their delegates unfettered in their action, and they were almost united in upholding the action of the State Society in 1882. The advancement of the profession would be promoted by resistance to the resolutions which are offered for the consideration of the society to-night. It was not on the New York society that any charge of revolution could lie. It has been said by all hands that if we consult with other physicians than those of our own school, we renounce our ties to the parent society. We contend that per-mission to consult with others should be freely allowed. We believe in the God-given right to give our advice to any who may seek it. [Prolonged applause.] These societies whose delegates have not been instructed are loyal to the interests of the profession. This was not a question of drugs and medicines, but one of ethics, and half the people of the country were laughing at those who still advocated the antiquated notions of half a century ago. In conclusion, he believed this trades-union sort of system should be dispensed with and the

State Society be progressive and liberal in its ideas.

Dr. Piffard upset Dr. Squibb's legal deduction that whatever the State Society did was subject to revision by the country society. by the county societies, by quoting from a law passed in 1866, which vested in the State Society power to control and supervise the by-laws of the county societies. The county societies under this law were amenable to the State Society, and not the State Society to them. The law had made the State Society superior. The Code of Ethics was not a part of the constitution; it was simply a by-law upon which we could act, and which action

must be accepted by the county societies.

Dr. C. R. Agnew made a long address in which he sustained the new code, and quoted the case of The People, ex, rel. Gray vs. The Eric County Medical Soci-ety, in which Judge Marvin held that the county societies were subordinate to the State. This was a serious mo-ment in the history of the society, and those who are endeavoring by their opposition to the code to lead the

society into an abyss should understand they were doing what is contrary to the laws of the State and public policy. After much filibustering the previous question was ordered, and the main question was then put by ayes and nays, resulting in the rejection of the resolutions by 99 ayes and 105 nays.

Mr. Roosa then offered the following, which was carried, and, on motion of Dr. Wey, of Elmira, laid on

the table for one year:
The Medical Society of the State of New York, in view of the apparent sentiment of the profession connected with it. hereby adopt the following declaration, to take the place of the formal Code of Ethics, which has, up to this time, been the standard of the profession

of the State.

of the state.

With no idea of lowering, in any manner, the standard of right and honor in the relation of physicians to the public and to each other, but, on the contrary, in the belief that a larger amount of discretion and liberty in individual action, and the abolition of detailed and specific rules, will elevate the ethics of the profession, the medical profession of the State of New York, as here represented, hereby resolve and declare, that the only ethical offenses for which they claim and promise to exercise the right of discipline are those comprehended under the commission of acts unworthy a physician and a gentleman.

Resolved, Also, that we enjoin the county societies

and other organizations in affiliation with us, that they strictly enforce the requirements of this code.

John G. Adams, as a delegate from the New York Academy of Medicine, offered a protest against the action of the society, charging that it had "assumed an attitude and adopted a policy in direct and open hostility to the honor and the best interests of the medical

profession.

The report of the committee on legislation was presented by Dr. Sturgis, and recommended the drafting of a bill to regulate and throw additional safeguards about the practice of medicine. A lengthy discussion of the matter followed, the tenor of the remarks tending to show that the registration law of 1880 was inadequate to meet the requirements of the profession, as under it all forms of quackery could register and be legally qualified to practice. On motion of Dr. Hopkins

the report was adopted.

The report of the committee on the President's address was then read by Dr. Hutchinson, but, as it conflicted with the previous report of the committee on legislation, was ordered placed on file. The report stated that in the judgment of the committee legislative enactments for the regulation of the medical profession are not to be desired and that but little advantage has thus far resulted from such action in matters relating to our status as individuals or as a society; that there was no better method for elevating the standard of medical education than for physicians to discourage the study of medicine by those whose preliminary education is deficient, and to use their influence to guide students to those medical schools which furnish the most thorough course of instruction; that the committee did not consider that examinations conducted by a State board of examiners could be made so free from political influences as to be recommended to the meeting.

The efforts of the State Board of Health were com-

mended as worthy of hearty support, and a suggestion offered that hereafter the annual address be dispensed with, and the president's views on matters of interest be

incorporated in the inaugural address.

Dr. H. D. Didama exploded a bombshell in the society

by saying:
"Believing that the so-called new Code of Ethics is opposed to the opinions of the majority of the medical profession throughout the world as expressed in the action of county, State and national associations, and in discussions in medical journals; and believing also that discussions in medical journals; and believing also that this so-called code, by removing wholesome restraints, were content, perfectly. Our schools were increasing

encourages a spirit of lawlessness and sanctions fraud; that it is hurtful not only to the profession but to the public; that its adoption sent a thrill of joy through the heart of every quack in the land, and gave pain to the wisest and best of our associates in the regular profession; and by concerted action of the friends of honesty and good order, I offer the following amendment to the

" Resolved, That all action taken at the annual meeting of 1882, in regard to changing the Code of Ethics, b repealed, leaving the code to stand as it was before such

action was taken.

Dr. Wey moved to table, saying that the question was already covered by the resolution offered last even-

ing and now lying on the table for action next year.

Dr. Roosa denounced the resolution and the remarks prefacing it as an insult to the society and a violation of

all rules of honor.

Other members discussed the matter pro and con in a somewhat heated manner, and finally on the assurance of Dr. Didama that he did not intend to present his remarks as a preamble to the resolution, opposition was withdrawn and the resolution was received and tabled until next year.

#### HOMCEOPATHIC MEDICAL SOCIETY OF THE STATE OF NEW YORK.

The 32d annual meeting of the Society convened in Albany Feb. 18 and 14, and the President, Dr. John J. Mitchell, of Newburgh, called the meeting to order at half-past ten o'clock, and made a brief preliminary address, congratulating the Society on the harmony, enthusiasm and success that had attended its labors during the year. He said they should frown down all attempts that might be made to limit the individual freedom of any member of the Society, or to in any way add now articles to their creed. Beforeign to the hill add new articles to their creed. Referring to the bill before the Legislature in regard to a board of State ex-aminers, for license to practice medicine, Dr. Mitchell said that it was a matter for very careful and thoughtful consideration. He suggested a change in the method of nominating for Regent's degree, and for honorary membership of the State Society. As the doors of the Society had been opened to all applications for permanent membership which shall comply with the by-laws, it becomes very important that the boards of censors act with extreme caution, and exercise extra vigilance. reporting favorably upon those cases alone which they are quite sure will honor the Society by permanent membership.

On the recommendation of the Board of Censors, the following were elected permanent members: A. M. Woodruff, C. Spencer Kinney, S. T. Birdsall, J. F. Atwood, A. C. F. Von der Luhe, Robert Boocock, W. W. French, Wm. Zoller, L. L. Brainard, C. D. Hale, G. A. Tracy, G. H. Fulford, E. E. Snyder, C. F. Millspaugh, A. J. Clark, Alex. V. Stobbs, J. E. Slaught, J. C. McPherson, A. B. Carr, W. L. Miller, James A. West, W. B. Kenyon, George E. Gorham, Alex. M. Curtiss, Charence M. Conant, A. Wilson Dods, F. W. Adriance, Sayer Hasbrouck, Wm. More Decker, John L. Moffat, W. T. Laird, F. F. Laird, Walter Y. Cowl, Susan S. McKinney, James F. Doolittle, Ermina C. Eddy, John N. Tilden, Geo. W. Seymour, Clark Otis, Geo. H. King.
Drs. J. L. Corbin, Athens, Pa., W. B. Chamberlain, Worcester, Mass., and D. B. Whittier, Fitchburg, Mass., were nominated for honorary membership to the Society. On the recommendation of the Board of Censors, the

Society.

Drs. Dowling, Kenyon, Moffatt and J. J. Mitchell were elected to the Regent's degree.

ABSTRACT OF PRESIDENT MITCHELL'S ADDRESS ON THE FUTURE OF HOMOSOPATHY.

and our numbers never so large. Hospitals, dispensaries, and insane asylums were coming under our control in numbers rather greater than our professional corps could thoroughly man. As to success in our practice, we had presented statistics until we are tired, all demonstrating to the unprejudiced student that in the great mass of curable diseases our mortality was scarcely one-half that of our professional brethren of the 'regu-lar school.' The wealth and intelligence of the land saw our success, and to a wonderful extent had become our patrons. Necessity had produced us specialists in almost every department of medical science; and as to consultations, we were in the state of the milkmaid in the nursery rhyme, who replied :

" Nobody asked you, sir !" she said."

"There was a time, some years since, when we were without these specialists, and when we should have been pleased with gentlemanly, courteous treatment from members of the 'regular' fraternity in those cases where our law was not applicable, and where, from the fact of their having all the hospitals and most of the colleges, they could have the special training that we could not then obtain. But their treatment of us was neither gentlemanly or courteous, and we have progressed until now we have surgeons, oculists, gynecologists, and the like, who are the peers of any the 'regular school' can present. And besides this, we find in all our large cities eminent men of the 'regular school' who refuse to be held by the slavish rules of an 'American Medical Association,' and who are willing to aid us freely and heartly, when we need such aid, in spite of codes' and 'resolutions.'

"But amid all this prosperity and peace, without our knowledge, and certainly not in obedience to any request of ours, a clause was incorporated in the Code of Ethics of the Medical Society of the State of New York to the effect that 'members of the Medical Society of the State of New York and the medical societies in affiliation therewith, may meet in consultation legally qualified practitioners of medicine. Emergencies may occur in which all restrictions shall, in the judgment of the practitioner, yield to the demands of humanity.

This change of position met the hearty approval of the public, and the members of the Society were applauded for the noble, consistent position they had

"We, as homocopathists, were, of course, pleased that our 'regular' brethren had finally taken their stand upon the platform of freedom of medical action, upon which we had been for nearly a score of years. But the regular profession in other States, and almost all the regular medical journals, rose in arms and in alarm at this outrage, as they termed it, upon their orthodox and, permit me to say, supercilious position. A storm of abuse began at once to descend upon the authors and supporters of the new code. Of course Homocopathy and its adherents came in for more than a full share of abuse and criticism. Thus the issue is once again forced upon us, and we are obliged to come before the public, not to ask position, for we have it; not to ask for pat-ronage, for it is ours in the wealth and intelligence of the land; not to ask that institutions be placed under our control, for we have them in abundance. But simply to reply to the slanders and misrepresentations that have been urged against us in the public prints, and to deny the calumnies of those who, in speaking of us, are either not honest in their words, or have not taken the trouble to inform themselves of our present position, or

of our present views."

Dr. Mitchell then reviews at length the statements made by Dr. A. B. Palmer, in an article contributed to

The North American Review, and says that:

"Of nine propositions by which a man, who, being a Professor," we might suppose to be eminent in the regular ranks, tries to define Homosopathy, seven of 'regular' ranks, tries to define Homocopathy, seven of them taken as a whole, and one of them to a consider jects has just begun in the ranks of the "regular"

able degree, is false. In only one of the nine, that in which he speaks of our proving drugs upon the healthy, is honesty of purpose or fairness in argument exhibited."

Dr. Mitchell adds :

"For daring to have and to utter an opinion of our own upon medical subjects, they thrust us out of their County and State Societies. In derision they gave us a distinctive name. Under this name, used as a banner, we are conquering the nation. They have become tired of the contest, and now say: 'No more distinctive titles,' Very well; we cordially agree with you, but the first trade-mark name that has to be erased from party standards is that of 'regular.'

"But it is patronizingly said that 'now, forsooth, the regular physician may, perhaps, consult and associate with the Homeopathist, because they are better educated than they were in the past.' Perhaps this is so. By the closing of their doors, the regulars have compelled our students to graduate in our own homeopathic colleges to a very large extent; and we know that since we have had to educate our own young men we have

done it thoroughly.

The speaker claimed that the mortality bills of any city will show that there is a difference of from 20 to 30 per cent. in favor of the Homocopathic physician, when contrasted with one of the regular school, of equal patronage and practice, and gave statistics from the official records of several institutions in support of his

claim. He adds :

" Now I submit that such a record as this one alone ought in honesty to send every "regular" practitioner to his study, and there, by earnest work for a year or two, he may acquire the ability to achieve a like success. What is Homeopathy? It is deriving a knowledge of the effects of drugs by proving them, more or less ex-tensively, upon the healthy; and meeting diseased conditions by exhibiting as a remedy that drug which when given in health will produce symptoms and conditions most nearly identical to those met with in the patient.

"The dead past we have buried. The living present, with all its truths, increased intelligence, methods and appliances, is ours. In becoming Homeopathists we have never yielded our right to use any or all of these to their full extent, as our patients shall, in our individual judgment, require them for their comfort or their

"What then is a Homopathic physician, the penalty of consulting with whom has been expulsion from State and National societies, and being generally ignored by a majority of medical men? In answer, I have to say majority of medical men? In answer, I have com-that he should be profoundly versed in all the learning required by the "regular" profession of its graduates in medicine. He should have superadded to this the best knowledge of Homocopathy, its law, its limitations, the proving of drugs and the application of such drugs to the cure of disease in the human economy that his time and his abilities will allow him to obtain. I do not know but I should add to this a natural tact for

medicine—a genius for curing.
"In regard to the resolution offered by the "regulars" last year, we would state we did not directly or indirectly ask any such action. The resolution having been adopted, we halled it as a good omen. Not that we thought the "regulars" were becoming Homoco-paths, but that war might cease. We knew that we paths, but that war hight cease. We have the could do them good in the department of the practice of medicine to which for half a century we had specially devoted ourselves. And then they could be of service to us in the various departments of surgery, pathology, hygiene and climatology, which we had more or less relegated to them. Any response on our part was not necessary, for they were merely coming to the position that we had occupied for a score of years.

Our sympathies and good wishes are with them.

"It is an entire fallacy to assert that a consultation cannot be held with a physician holding diverse views from your own, without a compromise of your position, or a sacrifice of your honor. That is, if the consultation is intended to advance the interests of the patient, and not merely to sustain the position of the practitioner making the demand. Even in the treatment of disease men of diverse views may approach a case, and from their different standpoints come to a harmonious mode of procedure. The difficulty of doing this is more apparent than real. In the first place we use all the drugs known to the old school physician.

"Secondly. Our doses can vary from the largest old school potion to the highest of our infinitesimale, without infringing at all upon our law of therapeutics.
"Thirdly. The constantly increasing use of our drugs

in the cure of disease by the 'regular' physician makes the matter still more easy of accomplishment. Hun-dreds of our drugs are placed in their true relation to disease in allopathic works, through the use they have made of our provings and our works upon the practice of medicine. And this process of assimilation of our discoveries is constantly going on.
"But can our 'regular' friend be of use to us in treatment of cases? Well, yes, I presume he may. He produced the production of the producti

treatment of cases? Well, yes, I presume he may. He understands the methods and appliances of palliative treatment better than we do. There are, of course, cases where our law fails or is inapplicable. In such cases we may have to resort to the old school methods, for one cause or another. Yes, it is evident, we can consult with those who hold dogmas at variance with our own. Our law, far-reaching as it is, has its limitations, and even the ideal Homocopathic physician is sadly mortal and of very finite knowledge.

"We are then to continue as a school of medicine, distinctively liberal in its character, ever holding out hands of welcome to any one educated to the level we

have fixed; yes, refusing no one, provided he be lawfully educated as a physician, and honorable and true.
"We shall be obliged to exist in our organized capacity until a chair of the theory and practice of Homophy shall exist in all the medical colleges of our land. And until our students shall be examined upon their merits, and shall have position according to their attain-ments, and not upon the ability of their preceptors or themselves to utter the shibboleth of 'regular.' shall continue to occupy advanced positions until our army and navy shall be open to all fitted by education and attainments to sustain their examinations. time of which I dream will surely arrive. umph of the cause I advocate to night all party lines shall be broken. Then the banners of the 'electrics,' of the 'regulars,' and of the 'Homcopathists' shall be

of the 'regulars,' and of the 'Homosopathists' shall be lowered, in order that, the party watchwords having been erased, the noble legend of 'Scientific Medicine' may be emblazoned thereupon."

The following were elected officers for the ensuing year: President, E. Hasbrouck; First V. President, W. B. Kenyon; Second V. President, A. P. Williamson; Third V. President, L. A. Clark; Secretary, A. P. Hollett; Treasurer, E. S. Coburn. Censors: Northern District, A. W. Holden, George W. Little and D. N. Clark; Southern District, H. C. Houghton, J. L. Moffat and W. Y. Cowl; Middle District, Geo. B. Covert and M. O. Terry; Western District, Charles Sumner. A. R. M. O. Terry; Western District, Charles Sumner, A. R. Wright and E. W. Rogers. Bureaus: Surgery, F. E. Doughty; Obstetrics, R. E. Moffat; Clinical Medicine, Geo. E. Gorham; Materia Medica, F. F. Laird; Mental and Nervous Diseases, C. S. Kinney; Gynæcology, J. J.

Under Section IV. a distinct line is drawn between Mitchell; Laryngology, Chas. E. Jones; Opthalmology, Cure and Recovery, and the writer shows how

school. We feel assured that the medical gentlemen of the New York Society will not tamely submit to wrong and injustice. We believe that the conflict will be continued, and that it will in time succeed, or else a third needical association will be instituted, which shall be free to all thoroughly and legally educated medical men. Our sympathies and good wishes are with them.

"It is no notice follow to assert that a consultation." ed as the place of the next semi-annual meeting, on the second Tuesday in September.

#### THE ANNUAL ADDRESS BEFORE THE NEW YORK MEDICO-CHIRURGICAL SOCIETY.

The annual address before the New York Medico-Chirurgical Society by its President, Dr. E. P. Fowler, delivered Nov. 14, 1882, touches on certain vital ques-tions in medicine which have largely absorbed the medical mind of the day. The address seems to us an especially fortunate one, delivered, as it was, before a society whose aim it is "to collect a body of workers practically untrammelled by the theories or prejudices of the hour, who would be able and willing to investigate life in all its phases, both normal and abnormal, and who possessed the courage of their convictions, and that even yet greater courage which is required to ingenuously acknowledge one's errors and to assist others in avoiding them.'

The address deals with the following five subjects; 1. History and Objects of the Society; 2. Medical Education and the Right of Personal Opinion; 3. Ætiology; 4. Cure and Recovery; 5. Homœopathy—does the Term Signify anything which Exists? Nature of Disease.

The Society now numbers thirty-one members, twen-ty-five of whom have contributed theses, making altogether a printed octavo volume of 832 pages. of the Society is broad and liberal. It discountenances anything of the nature of a trades-union; it encourages all honest and thorough investigation.

The necessity for reform in our system of medical education is strongly urged. As already set forth in this journal, a certain amount of State control limiting the jurisdiction of the teaching body, as exists in Europe, especially in Germany, must form a part of our educational system. The right to teach and the right to li-cense must be vested in district bodies. "The ultimate examining and certifying body (in Germany the 'Staats Examen'), and the executive, the State, have no proprietory interest in the franchise to be granted, and could have no incentive or bias other than towards the adoption and exaction of higher educational requirements as the only means through which the legal privileges could be obtained, and thus at one blow all schools of medical education which failed to supply candidates with the required amount of knowledge would become moribund."

Certainly a system requiring a thorough education of all permitted to practice would largely do away with schools and cliques and the contentions and bickerings over differences of opinicn and modes of treatment. An educated gentleman can respect differences of opinion and practice in a colleague educationally and legally his

Better preliminary requirements, longer courses of study, better systems of examination, the separation of the teaching and licensing bodies, these are the elements

which are to reform present methods of instruction.
Under Section III. the great question of Ætiology in medicine is discussed. Much of the research and thought of the day is toward the solution of this great problem. The researches of Pasteur, Koch, Klein, and a host of followers, will revolutionize much of our present knowledge of the causes of disease, and will open out many new roads for future investigation. The atmospheric and telluric influences are being more thoroughly studied with our better knowledge of the atmosphere and soil. Under Section IV. a distinct line is drawn between

absolutely necessary it is that we distinguish between the curative actions of drugs and nature's own efforts. This is really the great problem in therapeutics. It has been the great obstacle in the way of progress in our knowledge of drugs. It is an utter disregard of this distinction which has encumbered medical literature with a mass of crude and false observations, worse than useless. The faculty of acute observation is granted but to a few; a man may be able to read Homer and write good latin hexameters, and not be able to observe properly natural phenomena, and draw logical conclusions. The subject is a difficult one; so much the more need of greater care and greater endeavors.

Section V. discusses the significance of the term Homceopathy and the nature of disease. After citing Hahnemann's well-known theories he concludes:

1st. That in justice to its originator, the term "homeopathy" cannot be used in any other sense than that which he explicitly indicated; and no one has a right to demand or expect that the general profession or the public shall attach to it any other than the correct, etymological meaning which its learned author himself did.

2d. That the term "homocopathy" does not, in any degree, contain the idea of a system for the selection of medicines; it simply contains the theorem that an existing disease must be cured by the introduction of another disease. The selection of the remedy is corollary, and comes under another head.

3d. That any doctrine teaching that diseases and the actions of drugs or poisons are abstract entities or non-entities, belongs to the mythology or fairy tales of medical history, far away from the known facts of physiology.

4th. That the theory contained in the term, is not to any appreciable extent entertained at the present day; that it does misrepresent the mass of those who allow it to be used to distinguish their belief or practice, and that a proper regard for a correct appreciation of their intelligence by the public, and of honesty in themselves demands that the term be put away in the garret, as worn-out medical furniture, which has no fitting space in the edifice of real science.

5th. I submit to you whether it would not more nearly accord with the results of recent physiological research to consider disease as consisting of natural physiological processes, which give discomfort, and are destructive because they are unsuited to the habits of the organism in which they occur; in other words, disease is unadapted physiological action.

While we may differ from the writer in the last clause more in the way he has expressed himself than the idea, these conclusions express, we think, the convictions of the best part of our school. The time has gone by for placarding the terms homeopathy and Similia Similibus; they explain nothing; they teach us nothing. The conscientious physician will prescribe his drugs to the best of his ability whether he can explain their action satisfactorily to himself or not by Similia Similibus. We know that ipecacuanha and nux romica cure certain kinds of vomiting; we know what iodide of potash will do in tertiary syphilis; we know what a host of other drugs will do; but we know very little about how they cure.

Moliere's latin doggerel in "Le Malade Imaginaire" comes to us here:

Mihi a docto doctore

Demandatur causam et rationem quare
Opium facit dormire.

A quoi respondeo,
Quia est in eo
Virtus dormitiva,
Cujus est natura

The address suggests many vital questions in medicine; it points out the great problems which are yet to be solved and the obstacles which stand in our way before we can have a science of therapeutics, properly socalled. Its broad and liberal spirit must commend it to all. E. R. C.

## TRANSLATIONS, GLEANINGS, ETC.

#### HOW TO MESMERIZE.

A recent writer on the mysteries of mesmerism, says "I lay it down as a matter which can be verified by all who are curious enough to try it, that the mesmeric conditions can be produced without the supposition of a subtle fluid, without the use of the cabalistic passes of the mesmerist, without the bouquet, the magnetic rod, or any of the mysterious means employed by the professionals to heighten the effect of what would be too simple and too unattractive if performed straightforwardly. The directions are these: Place the person to be operated on naturally in a chair. With your left hand, suspend by a string, about a foot from the eyes, some small object, a dark marble, or a bright steel ball, or a diamond—it matters not what, though something bright is, perhaps, preferable. Direct the subject to fasten his eyes and concentrate his attention on the object. Slowly raise your left hand until the object is far above the eyes of the patient as is compatible with his gazing steadily at it. Watch his eyes; at with his gazing steadily at it. Watch his eyes; at first you will see the pupils contract, but after a few seconds they will expand rapidly. When they are at the point of greatest expansion, move the first two fingers of your right hand from the object directly toward the eyes, the fingers being separated fork-like, to embrace both eyes. As the fingers approach, the eyes will close, and the subject will be unable to open them. After a quarter of a minute the subject will be them. After a quarter of a minute the subject will be thoroughly under control, so that the operator may make him believe whatever he tells him. Left quiet, the subject will sink into a profound torpor, during which his ears may be pierced, his cheeks sewed to his nose, and even a finger cut off without pain. him—and this is an important step—wind, either from a hand-bellows or a fan, should be directed against his eyes, or else his eyes should be tickled with a feather. The rationale of the method is simple. The fixed stare of the subject fatigues his retinal nerves, and when the of the subject larigues his return herves, and when the operator's fingers approach, the eyelids close, as eyelids always do when the eyes are threatened. But the fatigue of the nerves has produced muscular fatigue as well, transient paralysis in the eyelids has resulted, and they cannot be opened. The eyes being then closed, the delicate frontal nerves being exhausted, and the mind weds ween hy more transient or each ice. mind made vacant by monotonous attention to one object, mind made vacant by monotonous attention to one object, the patient is in a condition to fall asleep—and he does fall asleep. He is now ready to dream. The only thing remaining to do is to make him dream. But how is this to be effected? Dreaming, as has long been suggested, is the result of external suggestions. Dr. Gregory, to illustrate, having been thinking of Vesuvius, went to bed with a jug of hot water at his feet, and dreamed that he was climbing the sides of the burning dreamed that he was climbing the sides of the burning mountain. Dr. Reid read a book on the Indians, put a blister to his head on retiring, and thought in his sleep that he was being scalped. Both of the dreams, as all others are, were caused by suggestions offered ex-ternally. These suggestions being received while the directing power—the common sense of the mind—was in abeyance owing to sleep, were interpreted very erron-eously, yet according to plain laws of association. The hot water in the one case called up the previous subject of thought-Vesuvius; the stinging blister, in the other, the equally stinging scalping knife. It is now easy to see how the sleeping subject may be made to accept as truth, whatever he is told."

THE METRIC SYSTEM.—To convert grains or minims into centigrammes, multiply them by six; to convert drachms into grammes, multiply them by four; to convert ounces into grammes, multiply them by thirty-two.

THE PATHOLOGY AND TREATMENT OF DIABETES. At a clinical lecture at the Hôpital de La Pitic, Pro-fessor Laségue made some very interesting remarks on the pathology and treatment of diabetes. He divided diabetic patients into two classes, fat and lean, according as they may be found in either of these conditions. He also divides them into small and great diabetics, according to the quantity of the sugar which their urine may contain. The patient that excretes 20 grammes of sugar a day, may be classed among the former; those who pass more than 30 or 40, belong to the second class. Prof. Laségue attaches great importance to this division, for, as the small diabetic patient never becomes a great one, each class retains its peculiar character; from which it may be concluded that a patient who presents great irregularities in the quantity of sugar he excretes, and appears to pass from one class to the other, is affected more with accidental or casual diabetes than with the true affection. A third class of diabetic patients is what Prof. Leségue calls "les diabeliques fixes," and these may be found among the two former classes. In this class of cases the quantity of sugar excreted varies only by a few grammes, what-soever the treatment employed or the diet adopted, but this should not be considered of much importance in a prognostic point of view, the quantity of sugar not being a fair criterion of the gravity of the disease; for although the quantity of sugar in the urine may remain stationary, the extent of the general disorder of the system may still be very considerable. This, however, does not apply to patients who pass 200 or 300 grammes of sugar in the twenty-four hours; these cases must be considered exceptional and always of some gravity. M. Laségue establishes two other forms of diabetes, which he designates remittent and intermittent; in the first case the quantity of sugar was considerably reduced; in the second the sugar disappears, sometimes even completely, at certain periods; and, although these states of remission and intermission may be considered states of remission and interface man, yet patients of this category become cachectic, as patients of the other classes almost invariably do. This state, according to M. Laségue, would constitute the principal indication of treatment; but he does not approve of the severe restrictions generally placed upon diet and regimen of diabetic patients. He allows them to continue their usual mode of living, not even depriving them of farin-aceous substances, or the use in moderation of sugar, water or wine. As for the gluten bread so much pre-scribed for these cases, M. Laségue condemns it in toto, as not only being worthless, but it ends by disgusting the patient, takes away his appetite, and so hastens the cachectic state, which it is the very object of the physician to avert by all the means in his power.—Lancet, October, 28, 1882.

THE MODERN THEORY OF INFLAMMATION is explained and advocated by Prof. S. Stricker, M.D., of Vienna, in the first volume of the International Surgery (Med. Advance, May). He believes that we would do well to discontinue the mode which has hitherto prevailed of characterizing this process—viz., by the symptoms of heat, redness, pain, swelling, and impairment of function—and adopt another more in harmony with the results of recent researches in the domain of comparative histology and histogenesis.

tive histology and histogenesis.

"In the year 1874," he says, "I began to study keratitis in the mammalia, and here obtained results which explained the clinical phenomena satisfactorily. Starting from this point I examined all kinds of tissue, and the results were of such a nature that I also can now clothe the doctrine of inflammation in a simple form. Metamorphosis of tissue, return to the embryonic condition; division into amœboid cells of the masses which have become movable; hence the destruction and supparation. This is briefly the outline of my new doctrine."

ANCIENT USE OF DRUGS EXTERNALLY.—Dr. E. M. Hale, in *Hahn. Monthly*. Aug., mentions that Nicholas Culpeper, in his *Materia Medica*, published about 1750, says of burdock:

"Venus challenges this herb for her own, and by its seed or leaf you may draw the womb which way you please; either upward, by applying it to the crown of the head, in case it falls out, or downward, in fits of the mother (uterine spasm? H.), by applying it to the soles of the feet; or, if you would stay it in its place, apply it to the navel, and that is likewise a good way to stay the child in it."

"It is well known," continues Dr. H., "that the old physicians had much confidence in the curative power of drugs when applied to the skin. In this way corol. was supposed to cure whooping cough; copper, internal cramps and choleraic discharges; ambergris, cough and spasms; acculus hip., hemorrhoids, etc. It has been verified by our school that these drugs given internally are really curative in the diseases for which they were applied externally, and I believe they are often efficacious when worn next the skin. It may be possible that the old physicians actually saw good effects from burdock in uterine diseases, when applied as above noted Why reject such narrations?"

TREATMENT OF SYPHILIS WITHOUT MERCURY.—
Dr. J. E. Güntz, of Berlin, in a recent monograph, says of the bichromate of potash that it is a substance which can only be exhibited in very small doses, as it readily provokes violent vomiting, cardialgia. scute gastric catarrh, and even gastritis. Such doses are so slow in their operation, that the medicine is without real value when a prompt removal of syphilitic symptoms is demanded. But in such cases where active measures are not called for, quickly-operating agents, such as mercury, in particular, are found to offer no security for a complete and permanent cure. Hence, our author was led to try the virtues of the bichromate of potash on patients who had been ineffectually treated by other physicians in the ordinary way, with results which, as he describes them, must be considered remarkably encouraging.

The author claims to have discovered that the best way of using this remedy is by combining it with a carbonated mineral water, the latter being so prepared, and the quantity of the main ingredient so proportioned, as to obviate all risks of injurious secondary effects.

The results, it is declared, in all forms of syphilis, were so successful that, for many years past, during which Dr. G. has prescribed the "chromwasser" for over one thousand patients, he has found mercury entirely unnecessary in his treatment of this disease.

Elaborate tabular statements are presented in support of these assertions.—Journ. of Cutaneous and Venereal Dis., Nov. '83.

Acute Cardiac Affections of Old Age.—M. Ch. Féré believes, from a careful study of this subject, that acute affections of the heart, occurring in old age, are rarely due either to acute or sub-acute rheumatism, and that even though acute rheumatism may occur at this period of life, it rarely implicates the heart. On the other hand, he thinks, that although pulmonary affections may produce pericarditis, cardiac lesions in the old can almost invariably be traced to some renal affection.—Revue de Méd, March 10.

Success of Diploma Manufacture in Massachusetts.—Since the "Bellevue Medical College" of Massachusetts was exposed—and proved to be legal—the "American University of Boston," President, Dr. Buchanan (familiar name in this connection), and the "First Medical College of the American Health Society," located at Boston, have been incorporated, and Dr. Alfred Booth, the First President and one of the incorporators of the "Boston Bellevue," has given notice of his intention to start the "Excelsior Medical College,"

PATHOLOGICAL ANATOMY OF LUPUS.—Messrs. Vidal and Leloir (Le Prog. Med.) feel justified in associating with this disease a cutaneous affection described in another nosological order-warty scrofulides. cular lupus non exedens is characterized by an infiltration of embryonic cells into the superficial and oftentimes into the middle and deep layers of the derma. These cells group themselves to form primitive nodules and by coalescing form secondary nodules. a perfect resemblance to the tubercular follicle and the miliary tubercule. These nodosities are composed of small cells set in a very fine reticulum, their periphery is surrounded with a crown of embryonic elements intermingled with giant cells. The subjacent epidermis is thick and divided into small columns, which may be taken, upon a superficial examination, for the prolongations of epithelioms. The ulceration of lupus is con-secutive to the evolution of a phlyctena which is formed by the fusion, at a point of the mucous body, of epithelial cells tumefied and gorged with serosity.

The anatomical form of lupus offers a singular re-

semblance to that of tubercle. Do they depend upon the same disease, tuberculosis? The authors do not believe this, because they have observed a case of true tuberculosis of the skin which developed by a special course and duration. The clinic presents many other examples of this divergence between the two profor example, pharyngeal tuberculosis is painful, lupus of the throat is almost indolent.

Experimentation upon animals has never given any results after inoculation of lupus. The similitude of the anatomical forms of tubercle and lupus can be followed in the latter phases of their development; fibrous tubercle agrees with the warty scrofulide, what the authors call sclerous lupus.

Erythematous lupus, which the Vienna school considers to be the result of a simple chronic inflammation of the skin, belongs to the classification of lupus by its etiology, evolution and pathological anatomy. Here, the infiltration of the embryonic cells is no longer col-lected into nodules; it is diffused, scattered, in all the superficial layer of the derma and undergoes in places destructive degeneration. The accumulation of new elements takes place around the vessels or around the glands, where it obliterates the ducts and excites the appearances of whitish pimples filled with sebaceous matter. The acneic form deserves a special description, from its march and resistance to treatment, but the authors do not speak of its nature. Anatomically, the infiltration invades the sub-cutaneous cellular tissue and gives place in consequence to an atrophy and central retraction.—(T. M. S.)

NITRIC ACID A REMEDY FOR STINGS AND POISONS. Dr. A. L. Barry, in South Med. Record, states that having been severely stung by thousands of enraged bees while endeavoring to transfer a hive, he applied, by mistake. nitric acid to his face and hands, instead of street oil, and was surprised and delighted to find the pain and swelling suddenly relieved, as by magic, the poison gone, and that no cauterizing effect or injury had been sustained. A few weeks after this, a patient came to him with hands inflamed and much swollen from the effect of poison oak. He at once applied nitric acid, with speedy and absolute relief to the symptoms.

HOT PACK IN PUERPERAL ECLAMPSIA. -- For the cure of puerperal eclampsia either in the puerperium or the last months of pregnancy, active diaphresis alone, induced by a hot bath, 40° to 45° C., followed by the pack, is all-sufficient. The bath must not be prolonged over one-half hour, and two to three hours suffices for the envelopment in the pack. This method properly carried out, according to Brens (Arch. f. Gyn., XIX, p. 218), will also cause odema and albuminuria to disappear without interruption of pregnancy.

OSSIFICATION OR CALCIFICATION OF THE PERICAR-DIUM.—M. Rivet, (Le Prog. Mèd.) refers to a patient, 78 years of age, suffering with senile dementia, who had an œdematous condition of the lower extremities, with but slight objective heart symptoms. Œdema of the eyelids and upper extremities appeared, followed by dyspnœa and sub-crepitant rales posteriorly and below, the patient dying on the following day. At the autopsy the lungs, liver and brain were found congested. The condition of the heart, however, was of interest from the extent of the pathological change. The organ was in its usual location. It could be easily separated from the sternum and lungs, but it adhered to the diaphraghm and could be detached only with difficulty. was increased in size. The pericardium was ossified or calcified as follows: It was surrounded on almost its entire surface, by a true cuirass or calcareous carapax, at the point of which the two folds of the pericardium were completely adherent and did not admit of any motion. Longitudinally it extended from the base to within two cm. of the point of the heart. At the base it was arrested at the auriculo-ventricular furrow, en croaching slightly upon the auricles. Transversely it covered all the posterior and part of the anterior face. It was only at the middle portion of the latter that the heart was exposed to the extent of 4.5 cm. At this point only was the two layers of pericardium distinct. The thickness varied; at the apex and base of left ventricle it reached 6.7 cm. At the apex of the right ventricle, the base and the auricle, it measured nearly 1 An examination of the substance forming this covering showed a calcareous nature, but nothing of the structure of osseous tissue. There was no altera-tion of the valves.—(T. M. S.)

Pericementities, its manifestations in the oraleavity, and its serious effects upon the general health, form ity, and its serious effects upon the general health, form the subject of a not very transparently written paper by G. A. Mills, D. D. S., in the May Proceedings of the Kings County Medical Society.

The disease is defined as the expression of a grater or

less degree of debility consequent upon nerve degener-acy. It has a variety of phases, but is more generally manifested at the peripheral margin of the gums. The is characterized sometimes by a slight tinge of conges-tion, changing the appearance from a normal, punkish color to one of deeper red or purple, and at others to an anemic, colorless appearance. This is followed by a de-tachment or relaxation of the membranes about the neck of the tooth, succeeded, in some cases, by the appearance of foreign substances, and an extended detachment of the tissues about the whole or a part of the neck of the tooth. Pericementum has a connection of continuity both with gum-tissue, and the periosteum. By being so allied to the cementum, a continued disturbance of the periosteum results in the complication of the disease, and the destruction, not only of these, but also of the os-seous portion forming the socket. The more or less acute and destructive character of the inflamation is determined by the constitutional powers of resistance. The exciting causes are many—mechanical irritation, dead pulps, alveolar abscess, crowded condition of the dead pulps, alveolar abscess, crowded condition of the teeth, accumulation of foreign substances, etc. Not a few cases manifest a peculiar phase, in which they are associated with a recession of gum-tissue, without apparent inflammatory action. This is called atrophy of the gum, and is erronerously supposed by many to be caused by friction of the brush. The serious effects of caused by friction of the brush. The serious effects of this disease upon the general health are well known to those who are familiar with its workings. It is undoubtedly cutting off large numbers prematurely, while thousands are dragging out an existence of lassitude, depression and inanition directly or indirectly traceable to its effects. The fact is established that it is a specific disease, exhibiting specified manifestations, and amena-ble to treatment under the same limitations as all disTHE New CADAVERIC ALKALOIDS.—Upon this still somewhat obscure subject, Dr. N. B. Sizer contributes a paper exhibiting much research, to the May number Proceeding Kings Co. Med. Society. We extract his most

important conclusions:

When nitrogenized bodies are broken down for bodily nourishment, or in any way changed in the living tis-sues, there is also produced a small quantity of the so-called "alkaloids." These may be both fixed and volatile, some harmless, others extremely polsonous. These facts have been known for several years by those interested in organic chemistry, and they are of the greatest possible importance in reference to medical and chemical experts in cases of alleged poisoning.

Amongst the various alkaloids of cadaveric origin, we find certain ones that are more easily confounded with poisonous vegetable alkaloids, and therefore, especial

pains must be taken to differentiate them.

The test is the instantaneous formation of Prussian blue in a neutral or slightly acid saline solution, and distinguishes ptomaines from the various vegetable alkaloids and toxic substances, which (except in the case of morphia, apomorphia, liquid hyoscyamine, or muscarine) do not give the blue color under similar circum-

The poisonous alkalies of cadaveric origin are distinguished, not only by their basic qualities and their powerful reducing properties, but also by their greater or less poisoning power, and their other physiological effects, such as dilatation, irregularity and final contractions. ogical eftion of the pupil; interference with the cardiac rhythm; stupor, tetany and death, with a systolic heart; want of coagulability of the blood; loss of muscular contractility, persisting after death, even in spite of the galvanic induced current. These facts are true, not only of so-called "ptomaines," arising from the putrefaction of the albuminoids, but also of certain toxic compounds contained in the normal excretions and secretions of the higher animals. Ptomaines and serpent venom belong to the same chemical family as the alkaloids in normal

These venomous substances appear not to be pathological exceptions, or putrid products merely, but more like residues left by the tissue metamorphoses, capable, under abnormal circumstances, of accumulating in the blood, or, in a normal condition, of excretion by certain glands for definite purposes, the most varied and di-

REPAIR OF WOUNDS IN ANIMALS.—Dr. J. G. Gil-christ, in an article on "Surgical Toxemia" (Weekly Med. Couns., June 14), expresses the opinion that, with a judicious use of homocopathic medicines, and a mechanical treatment of wounds in accordance with common and well-known surgical principles, there can be small opportunity for septic trouble, particularly where proper nutrition is attended to. "There can be no need of germicides, as a very simple and familiar illustration will show. Consider the method of repair of wounds in animals. From time immemorial the rapidity with which wounds in dogs heal has been cited as an illustration of typical repair. It was this that led to the many attempts to form a scab artificially. Yet, consider, there are no antiseptic precautions taken, and never have been, in treating wounds in animals, and the most ignorant observer has learned to leave them alone, to nature, as they phrase it. The conditions are such as we would suppose are peculiarly formidable for septic trouble, if admission of germs is the cause, and the contact with dead organic matter, furnished by the inspissated lymph, dried blood, matted hair, and extraneous dust, should add to the danger tenfold. I am not aware of a single example of septicemia in the case of wounded animals, and we know, also, that their wounds heal with remarkable facility; in fact, when death occurs from injury, it is nearly always from the primary lesion; rarely, if ever, from secondary affections.

JOINT-AFFECTIONS IN GONORRHUEA. - Drs. Duplay and Brun (Archiv. gén. de Mèd.) speak of two separate forms of joint-inflammation. One is a dropsical condition, especially of the knee joint, which is never complicated with swelling of the ligaments of the joint or the capsule; the other is a severe form, in which the pain is more intense and the swelling and redness of the joint and surrounding tissues marked. Many authors deny that the latter is due to a blenorrhea; some confound it with the former conditions. writers quote a number of cases, confirmatory of their opinions. (T. M. S.)

HYSTERIA IN MAN.—M. Debove (Le Prog. Med.) gives four observations. In the first case, hemianesthesia appeared after a burn. In another, there was hysteric delirium with hyperaesthesia. A third, after contractures and convulsions, remained hemiplegic for these member. He last hed, second, which appeared three months. He last had a cough, which appeared suddenly, with dyspnea and hamoptysis, which was ascribed to tuberculosis. But all were due to an hysterical origin and soon disappeared. The diagnosis of pulmonary phthisis, in two hysterical females, was no better justified. A man was attacked with paraplegia, then hemiplegia, which was successively regarded as saturnine, cerebral, etc.; it was hysterical only. hysteria is not rare among men ; it may simulate pulmon-ary congestion and tuberculosis : it may begin by an apoplectic attack recalling the cerebral congestion.—(T. M.

WIGHT ON THE COMBATTING OF SMALL-POX .- The author of this paper is the present able and efficient health officer of Detroit.

He calls attention to several groupings of facts, show-ing that vaccination furnishes the best method of fight-

ing small-pox:

1. The great mass of enlightened people believe in it.

2. Educated medical men are almost unanimous in favor of vaccination.

The governments of nearly all civilized nations favor vaccination.

4. Statistics on a large scale demonstrate the utility of vaccination

5. Special statistics also demonstrate the benefits of

As to the degree of protection of vaccination, when it is properly performed it is as complete a protection as small-pox itself.

ADMINISTRATION OF CF LOBOFORM .- At the recent session of the Am. Inst, of Hom. Dr. Willard, of gheny, Pa., read an essay on chloroform, in which he stated that the great trouble in the administration of chloroform was the fact that people don't know how it should be given. Instead of examining the pulse to ascertain the condition of a patient under treatment, see that the respiration is perfect. When any difficulty is observed in breathing, when the drug has been partially administered, stop for a moment or two until this is corrected and the patient has recovered. The drug may corrected and the patient has recovered. The drug may then be given in unlimited quantities. The Doctor said that in an experience of twenty-seven years he had never lost a case or endangered a life.

NUTRIENT SUPPOSITORIES.-Mr. H. E. Spencer, in the Brit. Med. Journal, recommends suppositories made of artificially digested meat mixed with a little wax and starch, as possessing many advantages over the ordinary enemata. These suppositories are of such a size that the digested and extracted product of twenty ounces of meat, from which the insoluable matter is removed, is contained in about five suppositories.

The convenience of this method is very great. He reports excellent results from their use in cases of gastric ulcer, etc., and other practitioners have found them of

the nimost value.

HYDRANGRA ARBORESCENS IN RENAL CALCULI, ETC. Dr. E. M. Hale says of this remedy that "it is evidently adapted to that stage when the calculi are in the form of sand or granules, and have collected in the kidneys or bladder. It doubtless acts by stimulating the secretory power of the kidneys, and the increased dis-charge of normal urine washes away the accumulated

In the New York Medical Record, of Dec. 10, 1881, Dr. Edson reported several cases in which the hydrangea was of undoubted benefit in assisting nature to expel calculi with less than the usual amount of pain. In the same journal, of Jan. 7, 1882, Dr. N. F. Brown, of Detroit, reported three cases of renal colic from calculi, wherein this remedy seemed to be of great benefit. His paper closes with the following observations: "Since my first experience with hydrangea, in 1868, I have frequently prescribed it in renal and urinary disorders. and generally with very gratifying results, and I would not hesitate to prescribe it in most affections of these organs-avoiding acute inflamation of the kidneys. chronic nephritis, in the prostatic troubles of elderly people, and in hysteria with retention of the urine, I have had pleasing results with hydrangea."

In Dr. Hale's practice it has rendered good service in

renal calculi, not only by mitigating the pain caused by the passage of the gravel, but by preventing their accu-mulation in the kidneys and bladder.

In cases of actual colic he recommends it to be given as follows: Mix one drachm of the tincture or fluid extract with half a glass of water, and give a teaspoonful every fifteen or thirty minutes, until relief is obtained.

After the attack is over and the calculi have passed

out of the body, continue the remedy in doses of five to ten drops three times a day for weeks or months.

In the urinary troubles of nervous women, the hydrangea acts better than mitchella repens, and even rivals pareira braza, which will control a majority of

the bladder troubles of women.

The sphere of action of hyrangen is not confined to calculous disorder. Its general sedative action on the urinary organs makes it applicable to a large number of diseases, namely: chronic catarrh of the bladder; irritable bladder; irritable urethra; prostatic disorders; and possibly in chronic gonorrhea and gleet.—U. S. Medical Invest., Sept. 1.

ECZEMA 08. VACCINATION .- Dr. Murray, in the British Medical Journal, maintains that vaccination exercises a very salutary influence on the course of eczema as oc curring in infants. So far from deferring vaccinnation, as is usually done, because of the existence of an eczematous eruption, he regards such existence as an additional reason why the child should be vaccinated.

And now comes Dr. George Thin, of London, (Edinburgh Medical Journal, for Dec. 1881) who gives a synopsis of the discussion on the subject of vaccinal skin-eruptions before the late International Medical Congress, and supplements the same with his own personal experience, the inference from all of which is that

vaccination may develop eczema.

The debate betore the Congress leaves no doubt that eczema follows vaccination with virus which is above all suspicion of impurity, and when this fact is placed beside the statement of Dr. Murray, that vaccination is the very best remedy for idiopathic eczema, have we not an illustration of the law of similia similibus?—Michigan Medical News—South, Medical Record.

THE ALUM PLUG IN UTERINE HEMORRHAGE.—Dr. R. W. Griswold, of Connecticut, says that for the last twenty years his reliance has been on a chunk of alum, as large as a hen's egg, and having a bit of strong twine tied around the middle, introduced into the vagina This treatment has never failed him, and he has never had any unfavorable results from its use. - Western Lancet.

HOSPITAL AT MELBOURNE.—The foundation stone of the Homocopathic Hospital at Melbourne was laid re-cently by his Excellency the Marquis of Normanby, one of the patrons of the institution, amid considerable pomp.

The building when complete will have a frontage of one hundred and ninety-five feet, will cost over \$50,000, and accommodate over one hundred patients.

INCURABILITY OF CONSTITUTIONAL SYPHILIS .- Dr. Thad. Reamy (Cin. Lancet and Clinic., June 24), at a meeting of the Cincinnati Academy of Medicine, said: Fournier is right in interdicting marriage when there are any nervous symptoms following syphilis; the speaker would go even further than this and forbid any speaker would go even intrier than this and forbid anyone to marry who at any time had any constitutional
symptoms of syphilis. Everybody knows that no man
can be said to have been certainly cured after he once
has had constitutional syphilis. Dr. Reamy knew a
case where gummata were found in the brain of a man who had no opportunity for contracting the disease during a space of at least twenty years. In the last twenty-four hours the speaker had seen a case where the sore was of the simplest character, the throat had a simple blush, and yet this man is now suffering from syphilis of the brain.

LEMONS THE ELIXIR OF LIFE.—Dr. Wm. Schmöle, Professor of Pathology in Bonn, has (Med Record) written a treatise on "A Scientific Method of Prolonging and Making Comfortable Human Life." He claims that this long and eagerly sought-for end may be secured by eating lemons. In order to preserve the elasticity of youth, it is only necessary to introduce some substance which will dissolve the excess of mineral matter in the system, and allow of its absorption and excretion. Such substances are the inorganic acids, and chief among these is citric acid, the next in value being lactic acid. Citric acid is best taken in the form of lemon juice, and it is recommended that a person swallow the juice of from two to eight lemons daily, year in and year out. Such a practice secures one against the attacks of rheumatism which afflict old age; it also prevents the degeneration of the arteries and the calcifications of the vascular system.

HYGIENIC VALUE OF THE ELECTRIC LIGHT.-The Frence scientific journal, La Nature, summarizes a communication from Dr. Javal, who believes that the electric light is absolutely without danger to the sight, in consequence of the amount of division which can now be obtained in it. L'Union Medicale also reminds its readers that similar researches of great interest from a scholastic point of view were published in that journal in May and July, 1881; including the researches of Dr. Cohn, of Breslau, who found that the electric light increases six-fold, as compared with daylight, the perception of yellow, and doubles the perception of green and blue. The observations of Dr. Blasius and Dr. Hoppe, in a discussion which took place at a meeting of the Brunswick Society of Natural Sciences, are also noteworthy. These scientists have shown that illumination by the electric light deserved preference over all other methods in use, for the following reasons: 1. It does not pollute the air with deleterious gases or other un-healthy products. 2. It induces a greater visual acuity than with daylight or gaslight. The conclusion adopted by the meeting was, that the hygienic qualities of the electric light have not hitherto been appraised at their real value.

GRINDELIA SQUARROSA causes and cures pain in the left side. This is usually splenic, but may develope anywhere from nipple level to hip.—Dr. Munk, Med. Tribune, June, 1882. See Allen, Vol. X.

HOUR-GLASS CONTRACTION OF THE UTERUS TREATED WITH ANYL-NTRITE.—Dr. Fancourt Barnes relates in the Glasgow Journal, a case of retained placenta caused by the nurse having given the patient a dose of ergot as soon as the child was born. The os internum and the circle of muscular fibres above it, called Bandl's ring, were so firmly contracted that Dr. Barnes found it impossible to get his hand into the uterus to deliver the placenta. The patient had three drops of amyl-nitrite given her on a handkerchief to inhale; during the inhalation the ring of muscular fibres round the os internum steadily yielded, until the whole hand could be passed into the uterus and the placenta detached. There was no hemorrhage whatever, and the placenta itself presented a remarkably exsanguine appearance.

itself presented a remarkably exsanguine appearance. In Barnes' "Obstetric Operations" we are told that the power of controling and suppressing uterine action exists in amyi-nitrite. Three minims of this added to one drachm of ether, taken by inhalation, is the form recommended. It does not produce unconsciousness; but it is an anesthetic as well as a sedative of muscular action. It is an antidote or opposite force to ergot. In the case in question the drug certainly acted admirably.

INFLAMMATION OF THE CIRCUM-ANAL GLANDS.—While operating for piles lately at the Soho Square hospital, Mr. Reeves took the opportunity of demonstrating to the visitors present an affection of the circum-anal glands, which is sometimes mistaken for fistula. These glands become the seat of inflammation, and get over-distended. A probe introduced through the small orifice shows that the cavity burrows for about half an inch in various directions. The best treatment is to slit them up and then to touch the exposed surface with nitrate of silver. Curiously enough, this small source of irritation is not described in any of the books on surgety.

EUCALYPTOL IN THE TREATMENT OF CATARRH.—
Dr. Edwin Rosenthal (Med. Bulletin) has experimented during the last winter and spring with eucalyptol in acute and chronic catarrhal affections of the air passages with peculiarly gratifying results. He has found its action to be antiseptic, deodorant and alterative. He directs that (Sander's) eucalyptol be placed in a wide-mouthed bottle—say one drachm to an eight-ounce vial—and boiling water be added, and the fumes therefrom be then inhaled; or that a small quantity be placed in the vial so that its contents may be spread over the sides of the vessel, thus making a larger surface for evaporation.

PROF. J.EGER'S NEURAL ANALYSIS.—On this subject, the Monthly Hom. Review for June, contains an apparently very conclusive article, in which Percy R. Wilde, M.B., asserts that "there is hardly a law of experimental enquiry which Prof. Jæger has not broken, and homosopathy is unfortunate enough to have the results put forward as a new discovery in its service."

A New Narcotto.—A drug, hailing from Queensland, has recently produced a considerable sensation in Australian medical circles, where it is at present only known by its quaint native name of "pitchery-bidgery." A sufficient dose of this substance produces absolute insensibility to pain. It has the peculiar property of enabling those who take it habitually to withstand fatigue and undergo physical exertion upon a low diet.

CARBOLIC ACID POISONING.—Dr. George R. Fowler, Brooklyn, (Ann. of Anat. and Surg.) reports injury to the knee, in which the joint was laid open to secure a bleeding vessel, the operation being conducted antiseptically. There was almost total suppression of urine, in seventeen hours there being but three drachms; in this quantity two grains of carbolic acid were found. The doctor does not hesitate to attribute death to this miraculous "vulnerary" and "antiseptic."

CLASSIFICATION OF MEN.—Hesiod said that in his day there were three kinds of men—those who understand things of themselves, those who understand things when they are explained to them, and those who neither understand things of themselves nor when they are explained to them. That was the classification in Greece over two thousand years ago, but it is a convenient one for use even now; and when a man has settled with himself to which class he belongs, his education has taken a long stride.—Billings.

How Gambetta Lost an Eve.—His father, who had no prevision of the boy's future celebrity, wanted to secure him against military service by keeping him an Italian. Immunity from soldiering was brought about accidentally. As Gambetta was watching a knife-grinder operate on a wheel, the blade of the knife got detached from the handle and flew into the boy's eye and blinded it. He was very much petted in consequence, and the mother was emboldened by her increased tenderness to insist upon Léon being sent to the Petit Séminaire of Montfaucon to receive a classical education. Her husband was an enemy to higher instruction, and thought the communal school sufficient for a boy whose destiny it was to be a provincial grocer.—From the March Century.

COLOR BLINDNESS.—Lancet, Jan., 1882. Among 1,000 Chinese and Japanese not one color-blind person.

#### THE AMERICAN INSTITUTE OF HOMEOPATHY.

As already announced the thirty-sixth session of the Institute will be held at Niagara Falls, on June 19.

To prepare in season the annual announcement, and avoid changing the matter after it is set up, thus involving additional and unnecessary expense, all reports from the Chairman of Bureaus and other matter properly belonging to the circular as usual, must be in the hand of the Socretary not later than May.

the hands of the Secretary not later than May 1.

The headquarters of the Institute will be at the International Hotel.

Fuller particulars will be given at a later date.
J. C. Burgher,
PITTSBURGH, PA., Feb. 10.
General Secretary.

## MISCELLANY

- -Professor Virchow is reported to be seriously ill.
- —The death of Corvisart, the great French surgeon, is announced.
- —Two hundred and sixty-seven medical works were published in Japan in the Japanese language in 1881.
- —A journal has been started in New York called The Undertaker's Assistant. Why not call it The Physician at once?—Texas Siftings.
- —Dr. Hughlings Jackson, in a recent address, says, very truly, that too much specialism in teaching tends to produce prigs rather than practitioners.
- —The lunatics at the Ward's Island Asylum are about to publish a weekly newspaper called *The Moon*. They will write all the copy, set the type and print the paper.
- —A case of real leprosy exists in Salem, Mass. The patient contracted the disease in the Sandwich Islands seven years ago, and it is approaching a fatal termination.
- —In orchitis of mumps, bathing the scrotum in spirits of camphor, the abdomen, pelvic region, thighs, etc., being also bathed and well rubbed with the same, is said to be a speedy cure.

- -Dr. Morell Mackenzie prefaces a recent lecture at a London medical college by remarking that he thought the days for teaching by means of lectures were pasexcept for clinics, now that books are easily access
- Willard Parker and Frank H. Hamilton are doing well. The former has suffered for some months from a disease of the urinary organs connected with advanced life, and his condition has been a troublesome
- -The present issue concludes the current volume of this journal, and such of our subscribers as do not wish to continue, will please so inform us, as otherwise we shall send it, and under the present postal laws payment can be insisted upon.
- —At Fort Worth, Texas, an irregular practitioner made a diagnosis of "erysipelas from the toes to the knees; measles from the knees to the waist, and seven-years itch from waist to the top of the head." In consequence, a number of the curious contracted small-nox.
- Perfumed soap in books of 100 leaves, two and a half by three inches square, and about three eighths of an inch thick, has come to us from Vienna. Similar books for physicians use are flavored with carbolic acid. A single leaf is sufficient for all ordinary occasions.
- —An unfortunate circumstance in our printing office, so mixed the matter on pages 350 and 351 of our last issue, as to make the text unintelligible, consequently we have reprinted those pages and they will be found herewith, so that they can be substituted for the others in binding-
- —The Homocopathic Pharmacopais (Medical Register, Jan. 15, 1883), recently published by Messrs. Boericke and Tafel, has been suppressed by the courts, after a short suit, in which it was proved that it had been in great part stolen from the United States and National Dispensatories.
- -The four medical experts summoned by the Government in the Guiteau trial-Dr. Gray, of Utica, Drs. Macdonald and Allan McLane Hamilton, of New York, and Dr. Kempster, of Kenosha, Wis.,—are to be paid each at the rate of \$25 per day. The total amount will reach \$13,000.
- -The London Lancet argues that nervous diseases and weaknesses increase as people come to live on the flesh of warm-blooded animals, the fact being that meat is highly stimulating, and supplies proportionally more exciting than actually nourishing pabulum to the nervous system.
- -A St. Louis savant remarks that "in China they always vaccinate people on the tip of the nose, and when there is danger of an epidemic a whole city gets vaccinated at once. It is said that after the things begin to take, it is impossible for an American traveller to realize that he is not in St. Louis.'
- A subscriber to the Medical Call writes that the mother tincture of gelsemium, given in drop doses every ten, twenty or thirty minutes, relieves ninety-nine per cent, of her cases of dysmenorrhea. If taken three or four times a day for about three days before the period, no severe pain will be experienced.
- -The Louisville Medical Herald says: "The British Journal of Homeopathy and the NEW YORK MEDICAL TIMEs should be read by every practitioner, in order that he may know what are the relative merits of science and superstition in medicine." This is very well, so far as "science" is concerned, and we are duly thankful for our share of the compliment; but some representa-tive of "superstition in medicine" is obviously needed to complete the list, and we know of no journal better fitted to serve in that capacity than the *Herald* itself.

- -Professor Binz has discovered that ozone mixed with air is powerfully anæsthetic, but too irritating to replace nitrous oxide
- -Mr. Spencer Wells has completed his one thousand cases of ovariotomy. Seven hundred and sixty-nine of them recovered. In the earlier part of his career, the mortality was thirty-four per cent., later it fell to three
- —J. D. W. Hatch writes to the Medical Counselor that a family named Tompkins, living in Shawano Co., Wis., and consisting of a father and mother, one son, aged 22, and a daughter, aged 18, have all become insane at one time. The whole family, with the exception of the daughter, was sent to the asylum at Oshkosh.
- —The latest invention for the protection of theatre audiences is a "penetrable safety wall," which has just been patented by an engineer at Kottsbus, Germany. The plan is to make the interior wall in all parts of the theatre of papier machè, made after a certain method. Such a wall will have the appearance of massive stone, but by pressure upon certain parts, where the words are to be painted in luminous letters, "To be broken open in case of fire," access to the exterior corridors is to be obtained, where escape to the outer air can be

DR. A. P. WILLIAMSON, Chief of Staff, reports 877 patients treated at the Homeopathic Hospital, W. I., for January, with a death rate of 2.9 per cent.

Among the interesting cases treated were the follow-

Acute croupous pneumonia 4; acute pleurisy 3; acute bronchitis 4; acute articular rheumatism 5; acute muscular rheumatism 3; gonorrheal rheumatism 1; syphilitic rheumatism 4; mitral insufficiency 16; mitral stenosis 4; aortic insufficiency 11; aortic stenosis 7; acute endocarditis 1; acute enteritis 3; cerebral apoplexy 1; sciatica 3; scute vaginitis 1; erysipelas, idiopathic 13, and traumatic 11; malarial intermittent 17; alcoholism 10; anthrax 1; wounds, contused 15, lacerated 5, and abrased 4; fractures, femur 1, ribs 6, sacrum 1, radius 1, and olecranon process of ulna 1; synovitis 1, and frost-bite 6.

BUREAU OF MATERIA MEDICA AND PROVINGS, AMERICAN INSTITUTE OF HOMGOPATHY.—Jabez P. Dake, M.D., Nashville, Tenn., Chairman: Drs. Conrad Wesselhoeft, Timothy F. Allen, E. A. Farrington, A. C. Cowperthwaite, William Owens, A. W. Woodward, Lewis Sherman, J. W. Hayward, P. Jousset, Tomaso

Cigliano, H. R. Arndt.
Our special subject for presentation at Niagara Falls,
June, 1883, is, "A Model for Materia Medica."
Each member of the Bureau is expected to prepare
such an exhibit of the two drugs named below, as in his judgment, the present provings and clinical records will allow, and in such form as may best suit the purpose of the homoeopathic student and practitioner (the exhibit of each drug not making more than five pages octavo,

brevier type, leaded).

It is the purpose of the Bureau to arrive at the best method of abbreviating or condensing, into one volume, say, a manual of eight hundred pages, the useful knowl-edge we have of the leading articles of Materia Medica. Each member is to report his work to the Chairman, Dr. Dake, at Nashville, Tenn., before May, 1888. The reports may be written in English, French, Ger-

man or Italian.

Drugs to be considered : nux comica and kali bichro-

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